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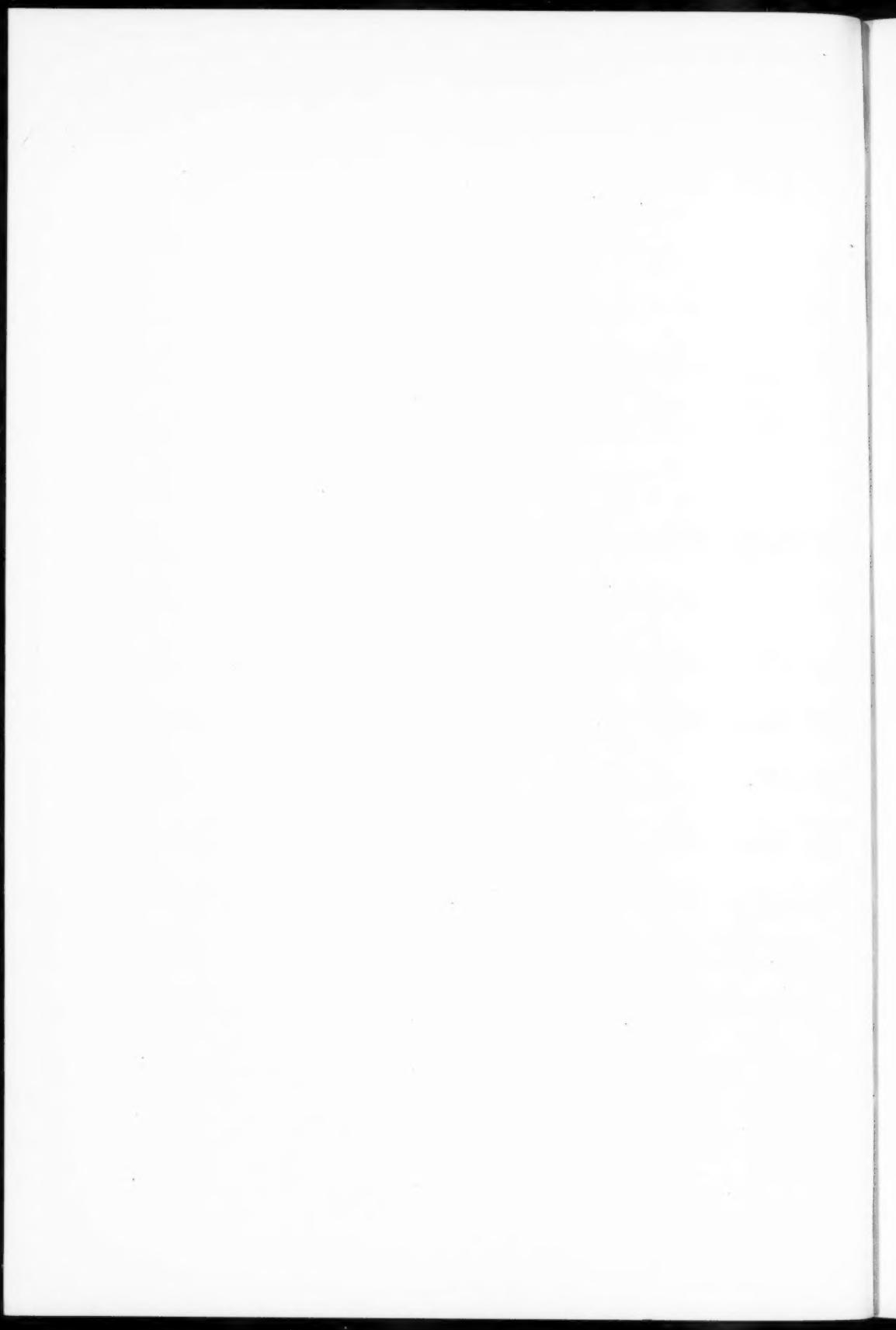
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THE ASSOCIATION FOR THE ADVANCEMENT OF PSYCHOANALYSIS
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TENTH ANNIVERSARY

TEN YEARS AGO a small number of analysts separated from the New York Psychoanalytic Society and founded a new analytic group—the Association for the Advancement of Psychoanalysis—in order to provide for the possibility of training psychiatrists along lines which in many ways deviated from Freud's theories.

The separation evolved from ideological differences which had gradually become too crucial for constructive work. Any cooperative effort, to be productive, needs diversity and unity—the unity consisting of a common base of essential issues and a willingness to explore in a scientific spirit the validity of one's concepts. It must be remembered that all members of the seceding group had been trained in and worked for many years with the traditional concepts of Freud. Thus, a common base existed then and exists today. The recognition of unconscious forces, of dreams being meaningful, the belief in the importance for therapy of the patient-analyst relationship, of recognizing and dealing with the patient's defenses, and the value of "free associations" are all part of a common heritage which forms the groundwork of psychoanalytic theory and method.

In other regards, however, we had in fact lost a common base. Our philosophic premises had changed in decisive ways. These concerned, above all, our belief in the nature of man. Man for us was no longer an instinct-ridden creature, but a being capable of choice and responsibility. Hostility was no longer innate but reactive. Similarly, egocentric and anti-social cravings, like greed or the lust for power, were

not inevitable phases of man's development, but an expression of a neurotic process. Growing up under favorable conditions, we believed, man would develop his inherent constructive forces, and like every other living organism, would want to realize his potentialities. Human nature was no longer unalterable but could change.

The reason we decided not merely to withdraw, but to develop a new group, was primarily the obligation felt toward the younger generation of psychiatrists to teach them what we believed to be more constructive ways in theory and therapy. This step required some courage because it veered toward an uncertain future. We started as a small group, without money, without prestige. What is more important, we did not yet have a firm theoretical ground to stand on. Many of the old concepts with which we were used to working had lost their meaning; our own theories were just beginning to emerge; all we had was a rather clear perception of the direction we wanted to go.

Our meetings and courses were held in our private homes. Only subjects which were of interest to allied fields were being taught at the New School for Social Research. Furthermore, during these first years we had to struggle not only with all the difficulties of a pioneering group, but also with disruptive friction within the group which resulted in two subsequent splits. At bottom, these were due to the fact that the group was initially too heterogeneous. Not all those who separated from the New York Psychoanalytic Society did so because of the search for new territory. Some joined the

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new group as a protest against dogmatic rigidity. The concrete issues precipitating the splits were the questions of lay-analysis, and of an affiliation with a medical school. Though all of us felt in close touch with medical science and the medical profession, the majority felt that for our development in research and teaching involvement with a larger institution was not timely.

The splits left us in a weakened condition. All the teaching and the organizational work had to be done by a handful of people. However, the remaining members became a more solid group. Each one of us did his ample share of the work according to his abilities, whether these were predominantly in scientific writing, in teaching, or in organizing. In all of these areas we have made satisfactory progress.

In the scientific field much work has been done on particular problems of psychoanalytic theory and therapy—too much, in fact, to enumerate within such a brief survey. It may suffice to say in general that we did gain considerable understanding of the neurotic development and its difference from healthy human growth. In addition, we got a clearer perception of the goals of therapy and of the means to attain them. Inevitably, the more we understood, the more keenly we realized the magnitude of the subject, and the more desirable became the productivity of the whole group. So, we encouraged in every way possible the spirit of free inquiry and the capacity for critical thinking in our "Interval Meetings" and in the courses. We encouraged original thinking in the papers written by members and candidates. We sponsored such experimental enterprises as group analysis.

We put in incessant work at improving our teaching methods. We profited in this regard from the experiences of progressive educators. We have tried to make better teaching not only a concern of the teachers,

but of the candidates as well. We have, for instance, encouraged their making more and more relevant evaluations of the courses, and have taken them into serious consideration in planning the curriculum.

The organization of the Association, the Institute, and the Candidates Association became increasingly solid and effective. We fostered the growth of a lay organization, ACAAP, for the important task of community education and mental hygiene. In contrast to our first headquarters, which had space only for small meetings and for the office, we now have space for all teaching except that done at the New School, for our library, and for the considerably increased office activities.

Naturally, with different personalities working closely together, frictions were unavoidable. Here, too, we had to learn from experience. We learned and are still learning that in human relations which are focussed on work to be done, personal factors such as righteousness, ambition, vulnerabilities and resentments have to recede before the task at hand. At the same time, we could have the confidence that each one of us was working at himself and his personal difficulties. And in this most inconspicuous work, a work done by the individual for himself and his self-realization, lies the greatest assurance for the further growth of the group. To be sure, we need creative minds, good teachers and organizers. But the productivity of these very activities and their benefit for the whole group depend upon the aliveness and the integrity of all the individuals composing the group. For knowledge may freeze into dogmatism; teaching may fall on barren soil, and organizing may deteriorate into bureaucracy unless a group is pervaded by a spirit of aliveness and an interest in the individual growth of all its participants.

—KAREN HORNEY, M.D.

ON FEELING ABUSED

KAREN HORNEY*

WHEN SPEAKING of feeling abused I refer to a neurotic phenomenon which is well known to psychoanalysts in all its multiple facets. Patients may dwell on the harm done to them by previous psychotherapists, by other physicians, by their boss, wife or friends, and, going all the way back, by their parents. In more diffuse ways, they may also feel themselves to be victims of social institutions, or of fate in general.

The particular content of such complaints varies infinitely. The emphasis may be on the general iniquity of fate. The patient may be convinced, then, that everybody is better off than he. Others find a better job, get a raise in salary; their clocks always keep the correct time, their cars never need repairs, their sorrows are negligible. More specifically, the emphasis may be on injustice done to him. He, the patient, has been cooperative, efficient, helpful, understanding; he has, in fact, done more than his share. But he got an unfair deal. The others failed to be grateful, to help him, to consider him, or even to show a minimum of decency. The emphasis may be on others' criticizing and accusing him, imputing motivations that were quite alien to him. He may feel exploited and imposed upon. Everybody seems to want something from him, or, indeed, to expect the impossible of him and to make him feel guilty if he does not measure up

to their expectations. The emphasis may be on being frustrated by others: "They" frustrate him; they keep him down; they squelch every joy he may have; they put every possible obstacle in the way of his achievements, or of his career. They begrudge every advantage he has, or every step ahead he takes. They humiliate him, slight him, despise him, disregard him. They betray and deceive him. There are but fine transitions from this state to that of the paranoid psychotic who feels spied upon, imperiled, persecuted, or ruined beyond repair.

As the neurotic patient gradually reveals these experiences, we are struck not so much by their kind, but by their frequency and intensity. We all not only *may have*, but in fact *have had* similar experiences. We all have been used as a means to an end. We have been deceived or disappointed. We have without exception had unfortunate human experiences in our early childhood which were painful and have left their traces. In other words, such experiences seem to belong to the human suffering we must bear and accept. And they may help us to become more discerning, more tolerant and to develop more compassion for the suffering of others.

The more entangled by unsolved inner conflicts a person is, the more do these experiences change in quantity and quality.

Read before the Association for the Advancement of Psychoanalysis at the New York Academy of Medicine, February 28, 1951.

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ON FEELING ABUSED

Generally speaking, the main difference is one between external provocation (factual affronts, offenses, etc.) and emotional responses. To begin with, the neurotic person himself often elicits inconsiderate or offensive treatment by his behavior without being aware of it. He may be so compulsively compliant, helpful and appeasing that he inadvertently invites others to run all over him. He may alienate others by his irritability and arrogance, but being unaware of his provocative behavior he may experience only that they reject or slight him in an entirely undeserved manner. This factor alone renders the frequency of factual abuse greater than for the relatively healthy person.

DISPROPORTIONATE RESPONSES

Furthermore, the patient's emotional responses to factual trespasses or mishaps are quite out of proportion. Because of his irrational claims, his demands on himself, his neurotic pride, his self-contempt and his self-accusations, he is so diffusely vulnerable that he is bound to feel hurt more often and more deeply. Minor occurrences, such as requests made of him, friends not accepting his invitation, disagreements with his wishes or opinions, are experienced as major tragedies.

Finally, even when there is no particular provocation from the outside, even with his knowing full well that his life-situation is a favorable one, he nevertheless may feel abused. He will, then, in subtle and gross ways—unconsciously—distort the actual conditions and give them in his mind a little twist, so that he appears as the victim, after all. This observation indicates that feeling abused is not only a patient's subjective response to existing difficulties in life. It is, in addition, prompted by some inner necessity which irresistibly *pulls* him to experience life the way he does.

The sum total of these factors often makes for a diffuse feeling of abuse. When speaking thus of feeling abused, I mean a person's rather pervasive experience of being the victim—a feeling which in its extent and intensity goes beyond, and is out of proportion to, actual provocations and

may become a way of experiencing life.

All these various feelings of being unfairly treated stem from different sources within the individual and must be traced individually. For instance, a neurotic person so easily feels accused by the analyst, or some one else, because he is constantly accusing himself without knowing it; or, at any rate, without knowing the extent and intensity of his self-accusations. Or, he feels easily slighted because his insatiable need for recognition lets anything short of unequivocal agreement or admiration appear to be a slight. He feels coerced so easily by others because he is so little aware of his own wishes or opinions and is relentlessly driven by his own demands on himself. All these individual connections must be traced and worked through in analytical therapy. But it is also important to see the totality of the picture because only by so doing—as we shall see presently—can we recognize the general background of feeling abused or victimized. This is the reason why I shall neglect the individual sources in this paper, and why I lump together under the heading of "Feeling Abused" all experiences of the kind mentioned so far.

UNAWARENESS OF FEELING ABUSED

The awareness of feeling abused varies, which in itself is a rather astonishing fact. Whatever the conditions, reasons and functions for feeling abused may be, it always has the one function of making others, or circumstances, responsible for what is wrong in one's own life. This would entail an unconscious interest in emphasizing the fact of being abused, and lead us to expect that the experience as such would always be conscious. This, however, is not generally true because a person may also have strong reasons for not being aware of it. The following three main reasons may militate against awareness.

Since feeling abused always breeds resentment, a person may be afraid of experiencing this resentment and its disrupting effect on human relations, and may therefore tend to keep it from awareness. Thus, the unconscious interest in these

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instances lies not in suppressing the experience of being abused as such, but in removing reasons for resentment.

In other instances, a pride in invulnerability and in inviolability leads people to suppress the experience. Nothing should happen—and therefore does not happen—that is not initiated by them, or under their control.

A third reason lies in the pride in endurance. They should be so strong—and therefore they *are* so strong—that nothing and nobody can hurt them. They should be able to put up with everything. They should have the unruffled serenity of a Buddha. Conversely, the very feeling of being hurt, injured, humiliated, rejected is a blow to their pride and, hence, tends to be suppressed.

VARIATIONS IN ATTITUDES

The attitudes toward feeling abused, or the emotional responses to such feeling, also vary. People with predominantly self-effacing trends tend to suppress the resulting resentment and develop a more or less concealed pride in suffering under a world which is morally inferior to them. Predominantly aggressive and expansive people, while not owning up to hurt feelings, tend to respond with plain anger, moral indignation and vindictiveness. The predominantly resigned person tends to assume a philosophical, detached attitude toward it. He takes it for granted that people are not to be trusted and withdraws from them.

Notwithstanding these variations in awareness and response, feeling abused has in itself some characteristics which are always present: The abuse is felt as real.

It goes with a feeling of being not only the victim, but the innocent victim.

It entails the feeling of, "It happens to me."

It feels real: People *are* unfair, ungrateful, condemnatory, demanding, deceitful, and therefore the patient's feeling abused is an entirely rational response. He will dwell on those situations in which realistic harm was done to him, whether in childhood or later on. He tends to maintain this

attitude even though he may have recognized in many individual incidents that the vulnerability of his own pride or the externalization of his self-abuse were the incisive factors in bringing about his feeling abused by others. But such isolated insights do little to undermine the whole phenomenon. They still leave him with the feeling that by and large he *is* the victim of others, or of circumstances. In fact, a silent battle goes on between the analyst and the patient on this very score: the analyst stressing the subjective factors; the patient in ever so many versions emphasizing the stark reality of the abuse. He may at best admit that his reactions to unfair treatments are exaggerated.

The fact of such a struggle against evidence to the contrary permits the assumption that the patient must have a strong unconscious interest in seeing the sources as outside of, rather than inside, himself.

He is the innocent victim: In more or less articulate or subtle forms, the patient will stress how undeserved are the mishaps which have befallen him. His own virtue and rightness, his purity, his goodness, his fairness appear to him in striking contrast to the deal he receives from others or from fate.

PASSIVITY AND ABUSE

"It happens to me": The patient experiences himself as the passive recipient of wrongs done to him. Passivity in this context does not always mean the emphasis on his helplessness. The expansive "types," as we know, abhor any admission of helplessness. They may be determined to prevent, by their vigilance and their planning, the perpetration of any harm. Or, they may be most active in getting back in a punitive way at anyone injuring them. The general implication of passivity here is rather the person's feeling that the abuses have nothing whatever to do with him, that they hit him like rain-storms, cold or heat. One of the results is that his major energies may be engaged in a battle with outside hostile forces, warding them off, appeasing them, or withdrawing from them.

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IMPLICATIONS FOR THERAPY

With the therapeutic aim of bringing patients back to themselves, the analyst will try to show them the extent to which their pride, their claims, their self-accusations, their self-contempt, their self-frustration, and so on, are responsible for their experiencing life as we have described it to this point. But these endeavors, although undertaken conscientiously, often meet with difficulties. The complaints may be driven underground, but the patients keep feeling wary, vindictive, appeasing. My contention is that these difficulties are due to an insufficient understanding of the whole phenomenon.

The analyst has no doubt whatever that the individual connections which he uncovers between the subjective factors in the patient and his feeling abused are true. What is more important, neither has the patient any doubts about their validity. But the patient does not *experience* these factors. He may, in fact, not experience much of anything that is going on within himself. He will, for instance, recognize that his feeling frustrated can be but a result of his own pride or irrational claims, or that his feeling disregarded and despised can be but a result of his self-contempt. But as long as he does not *experience* his claims or his self-contempt, these explanations must remain for him probable deductions which, of course, carry hardly any weight. If the analyst mistakes such intellectual agreements for real acceptance, he starts to walk on quicksand with every further step he takes.

The patient may not feel himself at all an active factor in his own life. He lives as though his life were determined by outside forces. While on the one hand there is a paucity of inner experiences, which often shows in a physical feeling of emptiness, or in compulsive hunger, his vision and energies are, on the other hand, all outward bound. While he may be consciously convinced that heaven and hell are within ourselves, this is *not* what he feels and how he lives. On a deeper level of his being, good and evil all seem to come from

outside. He expects the solutions to his problem, or his fulfillment, through a change in external factors: through love, through company, success, power, prestige. Having no real feeling for his own value, affirmation of himself can come only by the approval or recognition of others. As long as his interest is thus outward bound, he cannot, despite his best intentions, be interested in his difficulties, but must primarily be interested in what others think of him, or in the ways in which he can manipulate others. It does not matter, in this context, whether this manipulation is being done by charm, appeasement, impression, intimidation, or domination.

LOOKING OUT, NOT IN

Also, as long as he does not experience *his* feelings, *his* thoughts, *his* actions, he cannot possibly feel responsible for himself, or for his life. Whatever difficulties arise can only be brought about by others. "They" keep him down, disregard him, take advantage of him, coerce him. So, energies must be directed outward not only for attaining good, but for warding off evil, or for vindictively getting back at others. It is important for the analyst to realize that the patient may not only externalize this or that inner factor, but that his whole way of living is an *externalized living*. As a patient put it succinctly: "He looks out and not in."

When we understand the whole extent of such externalized living, with all its implications, it then becomes clear that feeling abused is but part and parcel of such living. For therapy this means that we cannot hope to make much headway with analyzing individual incidents of feeling abused before having exposed his externalized living as such.

We must look at the externalized living in two ways. As I have described it, it is a result of a paucity of inner experiences, of the loss of feeling a center of gravity in oneself and the absence of feeling oneself as a determining factor in one's own life. Briefly, it is one of the results of the alienation from self. But it is not only a result. It also acquires a function. It becomes an

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effective means for preventing a person from ever facing his problems, or even from being interested in them. Externalizing living, in other words, becomes a *centrifugal* living, characterized by active and often frantic moves away from self. The more a person emphasizes in his own mind the reality of others' unfairness, impositions, or cruelty, the more effectively can he evade facing his own vulnerability, the tyranny of his own demands on himself, the relentlessness of his self-abuse; the more the responsibility for self becomes meaningless in his mind.

In this sense, feeling abused becomes an over-all defense against owning up to any neurotic drive or conflict within himself.

This is the reason why he not only experiences himself as the victim, but feels irresistibly pulled in this direction. In other words, he not only feels easily humiliated because of many factors in his inner constellation, but he has a definite unconscious interest in emphasizing and exaggerating such "humiliations." This is why the patient's feeling abused is such an intricate mixture of facts and fancy. There is factual abuse, invited or uninvited. And there is abuse fabricated out of thin air, which seems as real to the person suffering it as the table he can grasp with his hands. It may create intense suffering, out of proportion to the provocation—and may barely touch the conscious mind, although it will be stored in deeper layers. Modifying Voltaire's words on the existence of God: if there were no abuse, the patient would have to invent it.

In certain phases of analytical therapy we can observe and uncover rapidly this defense function of feeling abused. But after the tendency has subsided to some extent, it may suddenly re-emerge with an impact brushing aside all reason. The patient may bring forth one association after the other, concerning the wrongs done to him, or he may be suddenly swept away by a huge wave of vindictiveness produced by a massive feeling of abuse. All of these complaints or rages, then, can be readily dispelled by the simple question: "Have you not come close to facing a problem in

yourself, and are you not trying to ward off its realization?"

DEFENSE AGAINST RECOGNITION

Patients who are familiar with this defense function may themselves catch on quickly to any emergence of feeling abused. Instead of wasting much time justifying the reproaches felt against others, they may take them as a signal, indicating their need to avoid a realization of some emerging problem of their own. Conversely, as long as the patient has not yet recognized this defense function, he will bitterly resent as an unfair imposition any suggestion of self-scrutiny. He is the one who is harassed by his boss, his wife, his friends, so why should he, in addition to all the wrong done to him, go through the humiliating process of self-examination and change? This is a reaction which again demonstrates his intrinsic lack of interest in outgrowing his difficulties. He may not be able, however, to experience and express this response of resentment to the analyst and the whole analytic procedure. But under the stress of having to be rational and having to appease, he may cover it up with a polite intellectual interest in the analyst's suggestions. The inevitable result is that nothing sinks in and nothing changes!

When, thus, we see feeling abused as an expression of centrifugal living and as a patient's over-all defense against facing his own problems and assuming responsibility for them, the phenomenon assumes a crucial importance in the neurotic process and in analytical therapy. It is, indeed, one of the main factors in perpetuating neurotic attitudes. It is like a heavy iron door that blocks access to the recognition of inner problems. But when analyzed sufficiently, it is also a gateway making possible an approach to them.

Does analysis of feeling abused, as described above, help immediately? In some ways its therapeutic effect is visibly beneficial. It does improve the patient's human relationships. He can relate himself better to others, to the extent that he realizes they cannot possibly give him what only he himself can do, and that he cannot make them

ON FEELING ABUSED

responsible for things which are his responsibility alone.

In that he feels himself the responsible agency in his life, his feeling of "I" also becomes stronger. Even though owning up to his difficulties is painful, he nevertheless gains a greater feeling of solidity and aliveness. And since he is less preoccupied with what others are, do, or don't do, he can direct more interest and energies toward himself and use them for constructive self-examination.

EXPERIENCING DIFFICULTIES

On the other hand, the very process of coming closer to himself entails being in for a troublesome and upsetting time. It would give a wrong impression if one were to say that he starts only now to see his difficulties. He has already seen many of them. But he saw them, as it were, as possibilities, as assumptions—likely to be, but not really, pertinent to his life. Now he begins to *experience* them and this sets going all his still-existing needs to justify or condemn them, with the result that he feels more divided than he did before. This inner battle can subside only gradually, as his interest in how he *is* increases and his focus on how he *should* be dwindles. At the same time, his real self emerges and he has to defend it against the onslaught of the pride system. All of this means that the symptomatic picture may be temporarily impaired. In simple terms, the patient may at times feel worse than before. Nevertheless, these upsets are constructive because of their being expressive of moves in a constructive direction, a direction toward finding himself and toward self-realization.

If, conversely, feeling abused is not sufficiently analysed, the therapeutic process is bound to suffer. Though the patient may make efforts to get at his problems, these efforts are bound to be half-hearted. Briefly, we could say that nobody can find himself if he keeps running away from himself. The patient cannot possibly be interested in himself and his difficulties as long as—consciously or unconsciously—he makes outside factors responsible for them. He

will use whatever superficial insights he gets about himself, to understand, manipulate or change *others*. In addition, he is bound to resent, unconsciously, that he should be the one to change, since, as he experiences it, the others are the ones who make life difficult for him. The analysis thus is bound to be delayed and to move in circles until the analyst wakes up to the fact that the changes which may take place in the patient lag considerably behind the efforts put in because some invisible forces prevent insights from taking root. Going after these invisible forces, he still may be able to get at their sources, but much precious time is lost.

Or, the analysand may have gained sufficient insight into certain aspects of himself, particularly in his relations to others, to function more smoothly. In that case, the analysis may peter out when the patient's obvious troubles are diminished. The patient may feel quite satisfied with what the analysis has done for him and decide to terminate it. His incentive to come to terms with himself for the sake of a more productive life is not great enough when he no longer feels driven by the whip of manifest disturbances.

RISE OF SELF-HATE

Finally, the patient's destructiveness may get out of hand. He may take a definite turn for the worse by becoming both more openly vindictive against others and more self-destructive. The greater vindictiveness against others cannot be explained simply by the patient's increasing freedom to feel and express it. The main danger precipitating such an unfortunate outcome lies in a rise of self-hate, often barely perceptible, but steady and relentless. For quite some time the analysis seems to go on satisfactorily. The patient seems to gain more and more insight into his neurotic structure. He also seems to be better able to cope with many situations. The analyst feels, nevertheless, on precarious grounds. The patient seems eager to learn a few things about himself, but his insights lack depth. He does not follow up on his own any connections he has grasped. His emo-

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tional life seems to remain rather barren. His relation to the analyst does not gain in solidity and his tendency to externalize abates but little, though he may be more cautious about expressing it. The patient keeps feeling interpretations as accusations and tends to justify himself automatically.

Among the factors the patient has seen within himself are also some of the sources of feeling abused: his pride, his irrational claims, his fear of self-reproaches and the subsequent tendency to put the blame on others, his need to use the others as scapegoats for his not measuring up to the height of his inner dictates. And with such realizations, the feeling abused, too, seems to recede.

EXTERNALIZING SELF-ABUSE

But as the analysis goes on, the patient's defenses start to wear thin and some of his problems begin to hit home. He begins to realize that his having problems is not merely a construct, but an existing fact, and he responds to such growing realization with an equally growing self-hate in one form or another—self-condemnation, self-contempt, self-destructiveness. This process, though painful, is not dangerous if the patient has developed sufficient constructive self-interest to help him to retain a healthy perspective on the onslaught of self-hate. If, however, such interest has not developed, he then has nothing to set against the impact of self-hate, and he feels threatened with total collapse or total disintegration. At this point, that part of feeling abused which is, briefly, an externalization of self-abuse comes into the foreground. He may turn against others—including, of course, the analyst—with a more or less violent vindictiveness. This process which has been described as a simple and rather mechanical "turning outward of aggression" is a desperate attempt on the part of the patient to make the others—and not himself—appear as the evil ones. They—and not he—deserve every imaginable punishment, defeat and destruction. He is, however, usually not successful in his effort to ward off self-hate, but on the contrary, is caught

in a vicious circle. His greater vindictiveness against others is likely to increase the very self-hate he is so anxious to tune down. The resulting inner turmoil makes him panicky and he may break up the analysis in a state of panic. Even at this stage, if it is not so far advanced that the patient is inaccessible, the analyst has still a chance to save the situation, provided he is alert to the impairment of the patient's relation to himself and to a rise of the patient's vindictiveness in general. In tackling it, the analyst must be extremely careful to avoid anything that might feel to the patient like an accusation. The best way to do so is not to take it at its face-value, i.e., as retaliatory hostility, but as an expression of inner distress, caused ultimately by his externalized living. If, on the other hand, self-hate and vindictiveness rise to an unbearable degree, the dangers of psychotic episodes or attempts at suicide are fairly great.

ROLE IN THERAPY

Feeling abused plays a more crucial role in therapy than is usually assumed. Even if the phenomenon is not obvious, it is important for the analyst to be alert to any signs of it, particularly in any case of a pervasive tendency to externalize. Or, even more generally, in any case of a dearth of inner experiences because of externalized and centrifugal living. It remains necessary—at the appropriate time—to trace all the individual connections with intrapsychic factors. The analyst must be aware, however, that these connections cannot mean much to the patient as long as he has shut himself off from his inner experiences. As long as he does not feel them, the whole realm of inner experiences remains to him uncanny, weird, mysterious. A too early unravelling of intra-psychic factors, therefore, is a waste of time. When the feeling of abuse is sighted, the analyst must proceed from there to lay bare all the aspects of externalized living, i.e., the ways in which the patient lives for, through and against others. The therapeutic effect of this step is a lessening alienation from self. As the patient gradually realizes how

ON FEELING ABUSED

his feeling of his own value, his hopes, concerns, fears, resentments and activities are determined by others, or by factors outside himself, he begins to wonder where *he* is. He wonders how little he *is* in his own life, how little he is the captain of his ship. This wondering is the beginning of an interest in himself and a search for himself.

SUMMARY

To summarize with regard to the phenomenon of feeling abused, it is important to see both the *diversity* of content,

form and individual sources, and the *unity* behind such diversity. This unity comes into clear focus only when we lump together all the manifold expressions of feeling abused and disregard for a while their particular sources in the neurotic structure. Only when seeing the phenomenon as a whole do we realize that it is an integral part of a whole way of living one's life outside oneself. Only then do we realize that it is a person's over-all defense against coming face to face with himself and his own problems.

THE NARCISSISTIC TYPE IN PSYCHOANALYSIS

MURIEL IVIMEY*

FOR A LONG TIME there has been a dictum in psychoanalysis that individuals with strong narcissistic traits are difficult to analyze, that treatment is likely to be unsuccessful, and that such individuals may even be unanalyzable. I have chosen to discuss narcissism because it is desirable to review the progress that has been made in understanding this phenomenon since we have abandoned Freud's instinctivistic libido theories. Radical changes in the theory of neurosis, plus the widened scope of our observations and a new understanding of the nature and dynamics of therapeutic changes have radically modified this pessimistic attitude toward the treatment of strongly narcissistic persons.

According to orthodox psychoanalysis, the crucial problem in treatment was the patient's attitude toward himself. Narcissism was considered a state of being in love with oneself. Since the individual was so tenaciously in love with himself, he was unable to love others or to develop a sufficiently strong transference to the analyst. Since successful treatment depended on positive transference, therapeutic analysis was blocked. This train of problems was considered insoluble.

To say what love means, in terms of libido theories, calls for something like a semantic revolution. Starting with the basic premises concerning the nature of man, the meaning of nearly every concept pertaining to human feelings and interests becomes dislocated. Libido thinking called for different meanings. Ideas became immobilized in a sense which did not consider the existence of anything but neurotic or pathologi-

cal significance, and which ignored normal, healthy feelings and interests. When we abandon libido theories, the term love retains the universally accepted meaning, and we have a basis for differentiating love from other feelings, such as infatuation, vanity, passion, or conceit. We can be precise, our meanings are clear, the terms we employ are generally understood by all discriminating users of the common language.

Love means "ardent affection, a feeling of strong personal attachment induced by sympathetic understanding." Love of oneself would mean a strong and constant allegiance to oneself, being in sympathetic accord with oneself. Infatuation with oneself means "inspired with foolish and extravagant passion for oneself, affected with folly, deprived of sound judgment."

We also would see the crucial problem in narcissism as stemming from the individual's attitudes toward himself. Rather than being in love with himself, we would say he is consciously infatuated with himself. In addition, he is at the same time unconsciously contemptuous of and disgusted with himself. When these mutually incompatible attitudes toward the self are clearly recognized, problems in the relationship with the analyst can be better understood, a good relationship can come about, and a successful outcome in treatment is a real possibility. This differentiation between love and infatuation is not to be made without the dialectic of true and false, healthy and unhealthy, constructive and destructive. Some changes are under way in orthodox psychoanalysis, as we see from the discussions and writings of our col-

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leagues who still adhere to Freud's theories. We hear there is a loosening of rigidity in orthodox thinking and a tendency to adopt some of the concepts similar to our new theory of neurosis. However, the road to real understanding and effective application of Horney's theory in treatment, in my opinion, will remain clouded and cluttered as long as heavy traces of libido thinking remain, as long as students and practitioners of psychoanalysis do not read and study Horney open-mindedly, thoroughly and with a genuine interest in learning.

NARCISSISM IN MYTHOLOGY

The term narcissism was taken from the myth of Narcissus.

"Narcissus was a beautiful youth who so charmed the nymphs that they longed to attract him. But he shunned and rejected them all, as he had rejected and humiliated the nymph Echo. He came one day to a clear fountain, fatigued with hunting, heated and thirsty. He stopped to drink and saw his own image in the water. He gazed with admiration at the image, he brought his lips close for a kiss, he plunged his arms into the water to embrace the beloved object. It fled at the touch, but returned again after a moment and renewed its fascination. He could not tear himself away, he lost all thought of food and rest while he hovered over the brink of the fountain, gazing at his own image. He pleaded with the image to return his love but his tears fell into the water and disturbed it. As he saw it depart, he exclaimed, 'Stay, I entreat you! Let me gaze upon you, if I may not touch you.' He cherished the flame that consumed him so that by degrees he lost his color, his vigor and his beauty which formerly had so charmed the nymph Echo. He pined away and died. When the nymphs prepared a funeral pile, his body was nowhere to be found, but in its place a flower which bears his name and preserves the memory of Narcissus."¹

PRESENT APPROPRIATENESS

Nowhere can one see more clearly the

¹ Excerpt from Bullfinch's *Age of Fable*.

blinding effect of libido thinking, the misinterpretation and perversion of meaning than is evidenced in the orthodox idea of narcissism as being in *love with oneself*. Were it not for theoretical considerations, our colleagues would undoubtedly see quite clearly that this unhappy youth had no concern or affection for himself, no allegiance to himself. But he had a foolish and extravagant passion for an image of himself—a passion so consuming that he literally went to pieces and could not be found.

We have not derived our understanding of narcissism from restudying the old myth, but from deep and painstaking study of the characters of people living today in whom strong narcissistic traits exist. I made this detour into the original story in order to satisfy myself as to the appropriateness of the term narcissism. I feel we are quite justified in the use of the term since it contains precisely and comprehensively all the essentials of our present concept. It is none the less precise because of its elaboration. The whole meaning and import of narcissism would be lost only if an attempt is made to whittle it down in the interests of mere conciseness, or to break up the whole picture and select one fragment—the isolated factor of so-called self-love—to stand for the whole.

The narcissist is infatuated with an image of himself in which his real attributes are fantastically exaggerated. He becomes lost to himself as he really is. He enters into and takes for real the vastly more beautiful and wonderful self he conceives of in fantasy. He has a blind conviction of unlimited powers, superior to those of all other human beings. The qualities and capacities of the self as it really is are relegated to obscurity in his mind. He reorganizes his mental processes in accordance with driving needs to glorify himself in his imagination. I will not discuss the steps in neurotic development or the reasons which have brought him to this solution of his inner conflicts. These are discussed in Horney's *Our Inner Conflicts* and in *Neurosis and Human Growth*. They are implied in the symbolic language of the old story of Nar-

cissus in the words: "He came one day to a clear fountain, fatigued with hunting, heated and thirsty . . . and saw his . . . image."

Since imagination is the means by which the individual arrives at self-glorification, and since he gives himself over to imagination, his rational judgment of himself fades away. Mental processes are swept into a systematic endorsement of every exaggeration his imagination produces. His shortcomings, weaknesses and faults are also endorsed as charming and attractive frailties, as decorative touches which even enhance the over-all attractiveness. In addition to his own endorsement, he has a compulsive need of the endorsement of others.

NARCISSISTIC ATTITUDES

How the narcissist really is to himself is obscure as far as conscious awareness is concerned. In fact, he is strictly prejudiced against a sober and realistic acquaintance with, and acceptance of, himself. In understanding narcissism, we must take into account this other factor in his attitude toward himself. Of equal importance with self-inflation is the rejection and condemnation of the real self. A one-sided view of the obsessive self-glorification is entirely inadequate. Behind the buoyant pride in the image, and part and parcel of the self-glorification is hidden aversion and passionate dislike for the real self.

This is not apparent in superficial everyday dealings with the individual, for he makes every effort to dazzle others and lead them far, far away from his unconscious dislike and rejection of himself as he really is. But those who are on intimate terms with him see moments of angry despair. He can be carried away in extravagant and grandiloquent disgust with himself. I do not believe that such expressions always come from a real inner experience of self-hatred, but they can often be a dramatization of self-hatred, in large part calculated to impress himself and others with the magnitude and violence of his rage against himself. There is an exhibitionistic quality in these outbursts that is motivated largely by wanting to move and

excite others to sympathy for the enormity of his black mood against himself. And when he is partially or wholly occupied in impressing others, he protects himself from a direct, inner onslaught against himself.

REAL VS. GLORIFIED SELF

It is quite another matter when he is alone, in quiet moments of inner lucidity, he may catch sight of some aspect of himself in its true light. He is then chilled and repelled. He feels the forebodings of a horrid fate: being mediocre, ordinary, just like other people. And because this insignificant nobody exists in him he senses a rage against himself which frightens him profoundly. He has no use for the real self which stands in such sharp and insidious contrast to the glorified self. Like a drug addict, unless he can contrive to get confirmation, he becomes restless, he itches, he must seek the company of others to distract himself and to compel their attention to the shining side of his personality. He must spread himself thin over an exhausting number of activities to maintain the illusion of having innumerable talents of the highest order. He must never apply himself in a serious and sustained way to any one of his many interests because he might come to the realization that developing a serious pursuit takes time and effort, which is what ordinary people have to put into something they do well.

Despite the attempt to identify with the glorified image and to have nothing to do with the real self, the conflict remains in operation, sometimes quiescent, but idling along, at any time capable of being partially or fully activated. Despite appearances, when we start to work with a narcissist, he is in a state of exquisite sensitivity to whatever will evoke awareness of the other side of the conflict. In approaching work with such an individual, it is of the highest importance to recognize the type, lest we unwittingly provoke a measure of outraged defensiveness which may precipitate premature breaking off of the analysis. Also, if the type is not recognized fairly early, the patient may, to his own real disadvantage, take the analysis into

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his own hands and stampede the analyst. Many months may be lost in scattered interpretations and piecemeal efforts to get into this or that problem. Under these circumstances nothing catches the patient's interest, nothing gives him the feeling that something about him is understood, nothing starts him thinking.

NARCISSISTIC TYPES

It is not always easy to recognize the narcissist. There are quite some individual variations. As far as my experience goes, there seem to be two gross variations. In some individuals, essentially narcissistic, the emphasis seems to be on compliancy character traits. In others aggressive traits are more frankly in the foreground.

Those in whom compliancy first catches the eye can be confused with the self-effacing type. Outstanding superficial characteristics are gentleness, charm, diffidence, helpfulness, deference, harmlessness. Such individuals appear to put their own interests in the background. They make a strong bid for closeness and intimacy. But before long, we see evidence of colossal vanity, exorbitant claims, tendencies to take advantage with the most bland unconcern for others. A very important differential between the self-effacing and narcissistic types is the reaction to frustration. The narcissist does not show his anxiety in increased submissiveness, but he quickly shows abused reactions, displeasure, sulkiness. Then come disparagements, veiled counter-attacks, and invidious comparisons between the one who has not come up to his expectations and others who are more obliging. It is difficult for the compliant narcissist to be openly vindictive, but he gets satisfaction for hurt pride through round-about humiliations of others, through retaliations, or in frankly vindictive dreams. Compliancy traits are emphasized in the idealized image and the individual operates in identification with his idealized image and not with his despised image, as in the case with the self-effacing type. The recognition of tendencies to master the environment mainly through compliancy traits, vanity, frank exploitiveness, rage

reactions and retaliations takes the case out of the self-effacing category and places it definitely in the expansive-narcissistic category. It makes all the difference in the world as to our understanding of the major solution, our plan of work, the patient's needs and the sequence of problems to be tackled.

The aggressive narcissist is not difficult to recognize, but differentiating him from the arrogant-vindictive type may pose a problem in diagnosis. He is apt to present more vindictiveness in his efforts to restore pride, but his need for vindictive triumph is not so insatiable, nor does his sadism have the brutal quality of the arrogant-vindictive individual, who often hits below the belt. The aggressive narcissist is satisfied with one good act of retaliation; he does not harbor grudges for years. If circumstances require that he continue contact with someone who has hurt his feelings, he will patch things up, and win the other fellow over, if it is to his advantage to do so. If he can drop the contact, he does—as if the offender no longer exists. If he is tied to a marital partner who, through long intimacy, does not subscribe to his needs for adulation, or gets tired of them, there may be a running battle, or periods of quarreling and reconciliation. It is not to his interest to make enemies, but to feel he is popular and admired. The typical arrogant-vindictive individual tends to be unconcerned with friendship. The more enemies he has the more righteous he feels. The aggressive narcissist feels the more friends he has the finer fellow he is, but he often has to change his friends. Over-all, he is warm when undisturbed; impulsive and hot in anger. He recovers his good-nature quickly. The arrogant-vindictive type is cold in general, calculating in anger, and long-range in his plans for vindictive triumph.

The analytic relationship is a crucial matter in treatment. It is an area in which we feel we make one of our most constructive contributions. The patient will enter into this relationship with all his needs for confirming his convictions about himself going full blast, and all his sensi-

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tivities alerted to anything that will arouse his unconscious self-hatred. He comes to analysis feeling generally beset by feelings of strain, inability to relax, occasional or frequent depressions. He often feels unaccountably held back in his career (really by the persistent hanging on of the unwelcome and disreputable real self). His expectation of analysis is that it will dissipate his symptoms. Unconsciously, he hopes it will somehow strike off the shackles that hold him to that miserable real self. He is prepared to take charge of the analysis and see to it that he gets these results.

THE ANALYTIC SITUATION

The analytic situation is made to order from the patient's viewpoint. He has undivided attention, sympathy, appreciation, someone who will help him. He feels he should have the center of the stage at all times and do most of the talking. The analyst should offer only a sort of supporting obligatto. The patient is factually blind to the real terms to which the analyst is committed in his work with him. It is well to recognize these expectations with understanding and with all respect for the human being at bottom. It helps for us to feel to the full what the inevitable process of disillusionment means to the patient, but also to realize that successful analysis will help him to achieve much greater and more solid benefits, immeasurably different from his blind expectations.

Early in analysis, the patient feels that the analyst's attention should be fixed, fascinated and uncritical. When he realizes that the analyst is interested not only in how he presents himself, but also in what is problematic in the presentation, he feels that the arrangement he had anticipated has been violated. It introduces a sour note. On the basis of his expectations, he shows enthusiastic admiration for the analyst. He acts as if he had the analyst in his pocket. He speaks of him as "my analyst." He endows him with the qualities and capacities of a master-mind who will accomplish wonders without thinking, without hesitation and in no time at all. He wants the analyst to make brilliant discoveries that

will crack the case wide open, dispel all frustrations and open up the way to fulfillment of his dreams of glory. In terms of how the analyst is actually proceeding, disappointment is bound to be felt by the patient.

Typically, the narcissist will experience disappointment as due not to a misunderstanding of his own, but to some deficiency in the other person. He is then frank to say that the analyst is lagging, slow on the uptake and not producing results. If he himself has made any mistake it has been in his choice of analyst or in his choice of a representative of a particular school. The analyst may not have said anything at all which specifically provokes irritation. But the simple reality of the analytic situation—the time it takes to produce material, the time it takes the analyst to think about the patient and his material, the time it takes for the patient to gain insight, to say nothing of the time it takes for him to change anything—is sufficient to cause irritation. In addition to a general dissatisfaction, the patient has the strongest specific reactions to the analyst's failure to show abounding enthusiasm or sympathy for everything about him: for his opinions, his accomplishments, his exploits, his ambitions, how unjustly he is treated by those who don't adore him. In fact, there may be plenty that can be said for him, and is said: his good looks, his health and vigor, his intelligence. Often, he has accomplished much. He may have been successful at college or at work. He may be married, have children and many friends. But matter-of-fact credit is quite insufficient. It is often brushed off angrily. Lots of people have done this much or have these things. He must have extravagant and unconditional admiration and endorsement, full measure and running over, constantly repeated.

As work gets under way, the analyst, with all care and circumspection, begins to focus discussion on some aspect of the patient's difficulties. This is also a specific provocation to irritation and anger.

A colleague states in a case presentation of a patient: "Within a moment of her

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entering the office (for the first session), it seemed to me that the whole room was alive, noisy, tense and restless." The analyst was friendly and attentive. An hour or two later, he was considering the patient's problems and seeking for a point of discussion. To quote again: "I was not clear about the sequence of some events she was relating. She said, 'Oh, no, darling! You got it all mixed up.' She woulddescendingly discard interpretations, saying: 'Don't be silly, dear.' On other occasions—she loved to tell funny stories—she might say, 'I love you. You have such a wonderful sense of humor.' Or she would turn and say, 'You annoy me. I don't like your voice. Must you have that dead pan expression on your face?' Or, 'I wish you wouldn't smile so smugly.' Often she asks, 'Can't you be more helpful? Say something.' Once, when really annoyed, she said, 'Oh, drop dead. You're only a cold business man. I think psychiatry is a racket. Don't be so doctorish, and don't be so subtle, dear. What's on your mind? Now tell me. Quit writing. My God! What are you doing there?'"

Such reactions tell us that when we touch on some real difficulty the patient feels threatened by the prospect of recognizing himself as a human being in trouble. He has tried to master all inner and outer difficulties through the illusion of omnipotence and through boundless pride. To face his real difficulties even in the quiet and confidential atmosphere of analysis is almost too much for him. To avoid what to him is intolerable humiliation, he must direct his anger and hostility outward.

RESPONSES TO THE ANALYST

It was this variability, these strong contradictions, in patients' reactions to the analyst which led orthodox analysts to feel that narcissists were incapable of a positive transference of sufficient strength and dependability to make progress in analysis. We have dropped the classical concept of transference because we do not interpret manifestations of the patient's emotional reactions as direct carry-overs of unresolved infantile conflicts originally connected with

the father or mother, and because we do not regard all of the patient's reactions as necessarily neurotic in character. They may be preponderantly so in the early stages of analysis, during which the patient is blindly and irresistibly driven, without understanding himself or the realities of the situation he is in, by reactions totally in accordance with his own inner logic. His reactions are acknowledged as understandable, but we seek at the same time to interest him in some characteristic pertinent to his need for confirmation which he would be able to tolerate. He often falls into a sort of fascinated interest in his own material and in the analyst's interpretations and reacts to the analyst as to one whose interest is now captured. He takes interpretations as flattering attention paid to his neurosis. He will preface his material with: "I had a perfectly amazing dream last night," or, "This is one for the book." So far he feels wonderful and analysis is a sort of game. When the analyst makes some comments about this development, the patient gets uncomfortable. He resents the implication that the analyst is serious, and in rather short order rapidly shifting reactions come into play. At times the patient is warmly friendly and flattering, at times angry, arrogant, tenaciously argumentative, accusatory and disparaging. These reactions are understandable in terms of the patient's need to entice on the one hand, and to avoid any serious consideration of his problems on the other.

The analyst tries to remain steadily sympathetic, despite flattery or attack, and he tries especially to remain firm on the importance and necessity of analysis, however much he respects the difficulties under which the patient operates. The analyst is no angel. At times he gets involved emotionally. If he is alert, he will acknowledge his reactions by word or deed, recover and come back into position, as it were. Such breaks are often valuable as they give the patient an opportunity to experience the effect of his reactions on others—especially on one with whom both reactions, his own and the analyst's, can be discussed.

We also differentiate other kinds of re-

actions, which are not exaggerated and unrealistic. We recognize capacities in the patient for valid discrimination and criticism, common sense, sound judgment and outlook to whatever extent they are in evidence. Such evidence may be picked up in almost every hour. It points to a sizable margin of rationality and energy not bound up with the neurosis, which the patient could and would willingly put to use in understanding what is unhealthy and subversive and how it obstructs his growth. He may willingly mobilize his better judgment if we engage his interest, and if his problems get clear to him. In all our dealings with the patient we are speaking to this part of him. Figuratively speaking it may be a part that is functionally deaf, due to the louder voices within him, which warn against listening and urge that he hold tenaciously to the established solutions of his life problems. But at bottom, there is a fundamental preference for reason and well-being. He has a healthy temptation to listen, to align himself with the efforts of the analyst to help him, and also to attune himself to the sustained belief that the analyst has in his real capacities.

CONCEPT OF CONSTRUCTIVE FORCES

Undoubtedly analysts of all schools are intuitively aware of constructive forces in their work with patients, but it may be that this knowledge hasn't the quality of reality, that it is a mere possibility or a vague hope which is not really believed in. When we bring the concept of constructive forces into the open in our minds, acknowledge the evidence and take settled cognizance of it, we are clear about what kind of relationship is to be achieved which will actually join patient and doctor in real team work. The premise that everyone is capable of constructive efforts is not a mere abstraction. It became clear as a result of observing and actually distinguishing what was, and what was not, realistic and constructive in the patient's associations.

The old idea of positive transference threw together all so-called positive feelings of the patient toward the analyst: adoration, the illusion of love, blind uncritical faith

and realistic confidence, and respect, consideration and genuine liking for the analyst. We would separate out feelings motivated by driving needs and regard them as retarding the therapeutic process and hence problematic. Then we would recognize feelings which were genuine rather than problematic, feelings conducive to a good working relation and hence constructive. The idea of negative transference threw together irrational hostility, argumentativeness without concern for the real issues, disproportionate rage reactions and evidence of independence, justified protests and resentment of real misunderstanding, or other deviations on the part of the analyst. We would differentiate irrational attitudes from those which were legitimate, and thus distinguish between obstructive and constructive manifestations.

"POSITIVE TRANSFERENCE"

We feel that the concept of "positive transference" as a necessary condition for progress in analysis is impractical and unsound, and that seeking for an alliance with the patient's constructive forces is the real issue in productive work. We cannot expect or require this either of ourselves or of the patient. It cannot be hastened or forced *without* working through all the factors operating in the patient which prevent a good working relationship. There is much that we can do to favor the emergence and mobilization of constructive forces if we keep alert to, and if we acknowledge, implicitly or explicitly, all manifestations of good sense, genuine friendliness, real interest in understanding, courage to bear with progressive disillusionment, capacity to stand up to anxiety and efforts at real work.

The working through of irrational and unrealistic components in the patient's relation with the analyst would therefore entail a realistic coping with the apparent, but artificial, positive reactions, and also with the negativistic and hostile reactions. During this process one seeks for a foothold with the patient on the common ground of good sense, healthy curiosity and interest, good will and mutual confidence. This is a

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slippery business at first, but it can be achieved with patience, steadiness of purpose and correct and well-timed analysis. In time the foothold becomes firmer and the common ground more solid.

It is a peculiar experience for the analyst to find himself, in the eyes of his patient, cast in the double role of bosom friend and bosom enemy. Friendship, from the patient's point of view, is based on a deal that the analyst help him to actualize his idealized image. Changing his *neurotic* values for friendship to *real* values, difficult as it may be, is a lesser problem. The more difficult problem entails working through the externalized self-hatred. It is not a matter of disposing, first, of one problem—over-friendliness—and then dealing with the hostile reactions, but of shifting from one to the other, making a little progress as each kind of difficulty arises. In my opinion, when the patient takes back his externalized self-hatred in analysis, his contempt and rage against himself are not so dangerous to him. There are two reasons for this: a good deal of their force has been spent against the analyst without any disastrous effect or alteration of good will, and his relation with the analyst has by this time improved realistically. He has reduced his impossible claims and much of his resentment against the analyst for not fulfilling them. He has begun to get an appreciation for the analyst as he really is—an ordinary mortal with limitations, with no miraculous powers, yet someone who can help him recover a true identity in exchange for an imaginary concept of himself. I believe there is something in this change in his view of the analyst that helps the patient to accept himself.

Such changes, to my mind, are necessary pre-conditions to the patient's entrance to the final phase of analysis—engaging in the total conflict between the destructive forces of the neurosis and the constructive forces of the real self. Throughout this phase it is important that the patient have a pretty solid feeling for the real interest and allegiance of the analyst in order that he feel genuinely supported in his final struggle to be his real self. The

narcissistic individual is just as capable of good human relations as any other type of patient, and of a sound relation with his working partner in analysis, provided the same general principles in work and in the analyst's relation to the patient are followed through. The narcissist is capable of resolving his capricious, turbulent and self-destructive drives if the analyst rides it out with him, with good will and respect, and holds to his task of accurately analyzing all problematic elements in the personality.

CONCLUSION

When this final struggle to be himself is precipitated and the patient buckles down in earnest, there is a very definite prospect of a successful outcome in analysis. I am firmly convinced that beyond a certain point in a well-conducted analysis the patient gets caught in an irresistible forward-moving current which is irreversible. During this final phase he will have good days and bad days. He will feel identified with his real self, feel more natural, stronger, steadier, more honest. He will stumble temporarily into the old pitfalls of self-glorification and go riding high again. He will succumb to disbelief in and rejection of himself. But he cannot deny or betray his deepest vital interest in the real self once he has been fully awakened from pipe dreams and nightmares about himself.

Radical changes in the theory of neurosis, plus widening of the scope of our observations and a new understanding of the nature and dynamics of therapeutic changes, have led to radical modifications of the pessimistic attitude toward treatment of narcissistic persons. One of the crucial factors in our theory of neurosis is understanding the dynamics of therapeutic changes. Crucial factors in therapeutic techniques are an understanding of the kind of feelings between patient and analyst which actually promote a good human—and working—relationship, and the precipitation of the final all-out struggle between destructive and constructive forces in the patient.

DUPLICITY

HAROLD KELMAN *

THE PURPOSE of this paper is to define duplicity more comprehensively in an effort to achieve a more effective therapy. The generalization has been made that all human beings are duplicitous as long as they are living. Its aim is to focus on the moral aspect of another assumption, widely held, that human beings are all more or less healthy and more or less neurotic as long as they are living. The generalization regarding duplicity is arrived at from certain theoretical premises, from some knowledge of Occidental and Oriental philosophies and from clinical evidence obtained in the psychoanalytic therapy of a variety of persons in a Western culture. The extent of its validity derives from methodological assumptions, theoretical formulations regarding human nature and the breadth of clinical evidence. Its verification or invalidation depends on further investigation. Its effectiveness in therapy, which seems evident to me, awaits confirmation or refutation by others. In this paper when the above generalization is made, it should be understood to include the foregoing qualifications, and be taken in the total contextual framework as its definition is being evolved.

The term *duplicity* is used to mean moral dividedness—the integrating of an individual on the basis of more than one set of moral value systems. Theoretically, duplicity refers to the moral aspect of the conflict process. It denotes moral doubleness, whether conscious or unconscious.

The word *duplicity* is used because it expresses most closely the construct being discussed; because there is neither a wish nor need to coin a new term, and because my desire is to elucidate and expand the meaning of this term in order to mitigate the destructive effects of holding to the one-sided, opprobrious meanings generally assigned to this word. For similar and other reasons, Simpson¹, in spite of the unpleasant connotations of the word *opportunism*, stayed with it to describe an outstanding characteristic of evolution. By opportunism he meant that "expansion of life follows the opportunities that are presented" and that "the course of evolution follows opportunity rather than plan."

To be quite explicit, the statement that all human beings are duplicitous as long as they are living is not an affirmation of the doctrine of original sin, nor of the theory that all human beings are by nature destructive. Its meaning is quite the contrary. The philosophic premises from which this assumption is derived assert that man by nature is constructive; that inherent in him is the potentiality for healthy growing; that the life-long tendency in man is toward self-realization; that the retarding and distorting of his growing are consequent to a lack of adequate support for, and the prevalence of destructive impediments to, growth, and that man through his own efforts and knowledge can resolve and mitigate the resultant sickness in himself as an expression of his inherent nat-

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¹ Simpson, G., *The Meaning of Evolution*, New Haven: Yale University Press, 1949.

DUPLICITY

ural tendency to move toward self-fulfillment.

HUMAN IMPERFECTION

An attribute of human nature—something to bear with and something that can act as a productive stimulus to growing—is a person's natural imperfection. Perfection in human beings is never attained, but the urge toward its approximation is always present. As we know that we are imperfect, and how and where we are imperfect, we will make fewer demands, in the compulsive and irrational ways we do, that we be perfect. We will also be able to avail ourselves of our awareness of our natural imperfection and allow it to act as a constructive stimulus toward self-realization. The less energy wasted in destructive self-condemnations for being imperfect in feelings, thoughts, actions and morals, the more will be at hand.

Imperfection in morals is to me duplicity, in the large and in its detailed manifestations. Only by becoming aware of the fact of moral imperfection in all of us can we stop wasting our energies in hiding and denying it, in destructively criticizing ourselves for it, in cloaking it with spurious moral righteousness, or with cynicism, which denies and derides moral values. Only then can we have more of our energies available for identifying and resolving the intensity and extensy of duplicity wherever we see it in ourselves, or whenever it is brought to our attention. Understanding it in ourselves and others will lead to that much less misery and that much more growing for all concerned.

An individual who is feelingly and/or intellectually aware, who is able on his own to infer, or to accept the suggestion of another, that he is duplicitous will be a person more or less able and willing to attempt to work at identifying and resolving the extent and depth of his moral imperfection. As part of this process, he would be evaluating his feelings, thoughts and actions from a moral viewpoint and would regard some as duplicitous. To define *moral* more clearly, I wish to distinguish it from aesthetic and factual valuations. Factual

values have to do with the qualitative and quantitative aspects of an object, a whole person, or certain aspects of his being. Values as to fact concern length, breadth and thickness, volume, velocity and energy investment. Such values are mainly utilitarian. Aesthetic values relate to matters of art. They pertain to pure feeling and sensation in contrast to ratiocination. Aesthetic values relate to what is beautiful as distinguished from the merely pleasing.

Moral values concern judgments made on what is right and wrong in people's conduct or behavior. *Moral* may refer either to the science or the practice of right conduct. *Ethical* commonly suggests the science, but ethical and moral are often used synonymously. In various systems of theology, philosophy and ethics, man has envisaged the moral ideals toward which he can grow. Man can conceive of and choose only those ideals which derive from his nature and toward which he can aspire as a life-long attempt at approximation. The fact that there is, e.g., no perfect Christian, does not prove the Christian ideal wrong. Nor is the democratic ideal proved inadequate because it never has been perfectly realized in a human society. That a human being cannot fulfill these ideals absolutely is due to his natural imperfection, the very existence of which can be a constructive stimulus to continuing efforts.

BROAD NOTION OF BEHAVIOR

Although moral value judgments are defined as relating to conduct and behavior, the broader notion of behavior not only includes action but feelings and thoughts as well. A person might not communicate certain feelings and thoughts of which he is aware, nor act upon them. They are still an expression of what he actually is. The forces operating in him which led to these feelings and thoughts might find reflection in other feelings, thoughts and actions of which, or of whose meaning, he was not aware. There is, then, moral evaluation going on, communicated or not, in awareness or not, at all times.

In analysis, further evidence is available for making moral valuations. The person

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in analysis is required to communicate all feelings and thoughts which come into his awareness and such actions as he observes during sessions. The analyst can observe other actions which the patient did not notice or communicate. The analyst can observe physical expressions of feelings and attitudes which his patient was not aware of, or did not relate. All this data is observed and collected. This objectivity is not neutral, remote, unfeeling or non-evaluating. That would neither be possible, human nor humane. The analyst comes into the analytic situation with the whole range of his feelings. The feelings and thoughts that he has, and those that he verbally communicates, must of necessity derive from a hierarchy of moral values according to which he is living and functioning in the analytic situation. Concurrently, the analyst would be making moral valuations about himself.

EVALUATING: ITS MEANING

A person who would rationally agree with the statement that all human beings are duplicitous would be making moral value judgments with regard to himself. This does not mean that he would be condemning himself. The word *judgment* often has the connotation of something negative or of a condemnatory criticism, just as the word *criticism* generally connotes a negative proposition, such as fault-finding. For these reasons, I prefer the neutral word *evaluate*, which has the meaning of judgment but does not carry with it the generally held, condemnatory connotations. Self-condemnation tends to be a destructive, blind alley procedure. That is particularly so if it is irrational, and, worse still, if it is going on and taking its toll without its operations being in awareness.

A person rationally aware of his duplicity would evaluate himself in a self-tolerant manner and feel similarly about others. With this tolerance would go compassion and sympathy, which have self-respect, self-reliance and wisdom as concomitants. For wisdom is not an intellectual matter, but a moral one dealing with the

better means and ends of living. Such tolerance carries with it the firmness and moral toughness necessary to be effectively discontented with oneself. That means having the courage to confront oneself with problems, or put oneself in situations, the square facing of which might lead to psychic and possible physical pain. With such tolerant discontent, the focus would be on specific problems. Such a person would not totally condemn himself or others for a single, or several, duplicitous behaviors, but evaluate them in proportion and in context. Such self-tolerance is clearly something different from self-indulgence.

Nor does tolerant understanding mean the condoning of duplicity. Such a person would no more condone duplicity in himself than in another. Condoning means and leads to the nurturing of duplicity. Condoning is not kindness but an expression of moral weakness. Condoning, in the eyes of some, is an explicit invitation to license. It encourages and leads to a fortifying of pride in being able to get away with murder.

Rather than condoning, a person constructively motivated would attempt to help people who do not see, have an interest in not seeing, or in fact have an irrational pride in their duplicity. While doing so he would rationally protect himself. Where limited or no results would come of his efforts, he might avoid them, protect himself if he had to continue to associate with them and attempt to discipline or restrict them, enlisting the cooperation of others. Moral pressure can be a constructive disciplinary force, like law enforcement agencies, as they are an expression of a constructive group morality.

A person constructively aware of his duplicity would feel responsible for it. Just as the word *judgment* so often carries destructive negative meanings, so does the word *responsibility* all too frequently connote condemn, blame, find fault with, and accuse. In using such words one should always be cognizant that although we may employ the term *responsible* in the sense I shall define, another person may experience our considering him responsible for

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his actions as an accusation of being culpable and a criminal. For judgment, the neutral word evaluate was available as an equivalent, but for responsible I can find no neutral equivalent. The definitions of the various meanings of responsible are being given to serve as clarification and as a corrective to the more generally held negative meanings.

THE NATURE OF RESPONSIBILITY

A person constructively motivated would feel responsible for duplicity whether in awareness or unconscious. How can a person be asked or made to be responsible for something unconscious? He is responsible in the sense that life will not ask him, but force him to bear the consequences of his duplicity, conscious or not. It will make it easier for him to bear the consequences the more aware he becomes of his duplicity, because with it will go a greater self-tolerance. Then it will not be an unknowing burden of consequences, but a knowing, self-tolerant bearing with the consequences, as their amount and intensity are being mitigated.

How does life make us responsible for our duplicity in relation to ourselves? We bear the consequences as we waste, distort or do not utilize what is given to us as human beings and as a special human being. It is our loss if we do not enjoy our capacities for feeling, thinking and acting; if we do not enjoy or care for our bodies or misuse them; if we pervert or do not develop the gifts and talents we have. We are the losers if we do not take, expand and extend opportunities for marital, social or work relationships; if we miss up on, or let slip away, opportunities for educational, job or financial improvement. In short, we will be less creative and productive. It is sad. It is regrettable. But the evidence is clear. We do bear the consequences of how we are and how we will live our lives. No one else can be responsible for us or for what is fundamental and essential in ourselves. No one can live our life for us, bear its burdens or feel its joys. Ultimately, that is our responsibility.

Society, as it imposes penalties for legal

infractions, is holding us responsible for our duplicity. Society in general and the more immediate groups in which a person lives impose their censure in various ways. He may be removed from his job. People may refuse to do business with him. He or his whole family may be ostracized from the various civic, religious or social groups of which he may have been a member. This exclusion can be even more painful when social moral censure is not manifested in explicit concrete situations, but remains unverbalized. This atmosphere of censure can slowly demoralize a person—the more because he feels helpless for not having concrete persons or situations against which he can fight back, or approach for constructive help and clarification.

One can say that it is unfair that a person be held responsible for his duplicity. He willfully did not make himself that way. Being born human he is by nature imperfect and is made more so by the imperfections of his society. That is all true. But an individual also reaps the fruits of his productive efforts stimulated by those very imperfections. Further, blaming his parents or society leaves the individual still the unhappy loser. Besides, as an adult, a person is no longer the helpless dependent child he was, and has resources available with which to work at this problem. When a person's duplicity is brought to his attention, he has the responsibility to do something about it, in so far as he can, on his own or through the help of a friend or a counsellor. Where books, lectures or professional help are available, he has the responsibility to seek such assistance and to avail himself of it in constructive ways. Once he has acquired the tools for self-investigation, he has the responsibility to work at that task as long as he lives. As he does, he will wish to, and be able to, hold society constructively responsible for the extent to which duplicity there exists. Then both he and society will benefit and become that much more responsible.

Above, I said a person rationally should assume responsibility for himself in so far as he can. As circumstances permit and as

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his state of emotional and physical health or illness allows, a person can to a certain extent exercise choice regarding responsibilities for himself and others. This presents a wide range of possibilities and degrees. There are circumstances, external and intrapsychic, where no choice exists. Such an absolute state is nowhere near as common as many would at times believe. Intrapsychic forces leading to a pervasive "I can't" attitude considerably narrows the feeling of choice possibility. Often associated with or underlying an "I can't" attitude is an "I won't" and/or an "I don't care" attitude. Such people too quickly and too easily feel they have absolutely no choice. Their absolute attitude is no more valid than the belief they hold that others have absolute freedom of choice, or choices very easily made. What everyone has, no matter what the circumstances or how sick he is, is a natural urge to preserve himself and become more of what it is in his nature to become as a human being and as a particular human being. The more a person can and does aspire to fulfill that human possibility, the more he can become responsible. For responsible in an ethical sense means to have the character of a free moral agent, to be capable of determining one's own acts and to be capable of being deterred by consideration of sanctions or consequences.

To the extent that a person could be rationally responsible, to that extent would his focus be on becoming more of what he really could become, considering his generic and individual potentialities. His interest would be in a rational security in contrast to an over-focus on maintenance of the status quo. With an over-focus on irrational being, another process sets in—that of irrational becoming. That process, in contrast to the spontaneous urge toward self-realization, i.e. of rational becoming, is compulsive and its end is to actualize the idealized self. A person moving in the direction of self-realization will know that in certain situations the maintenance of being must come first as an aspect of rational becoming. His would be a rational emphasis on being. Such a rational interest would

evidence itself in the process of rational becoming when he might be suffering a passive set-back, while staging a strategic retreat, or holding on to a newly won advanced position. His concern would be to husband, collect and regroup his resources while obtaining necessary respite until the time when another forward move could be made against growth retarding, obstructing or destroying forces.

Under these circumstances, duplicity as a strategy is a rational necessity, although as such immoral. Both the person resorting to that strategy and an objective bystander would feel constructively discontented with situations in which immoral behavior seemed essential. Such healthy discontent would be reflected in constructive efforts toward becoming stronger, so that such strategies would become less and less necessary. Such a person would be working toward a closer approximation and congruence of his real and his actual self.

What, then, do I mean by the statement that all human beings are duplicitous as long as they are living? To clarify this statement, I must first define conflict, central and basic, and the neurotic process, in order to show that duplicity is not identical with any of them but, as I use the term, refers only to the moral aspect of the conflict process.

DUPLEXITY AND CENTRAL CONFLICT

There are what Dr. Horney has defined as central and basic conflicts.^{2,3} Central conflict exists between constructive and obstructive forces—between two systems of forces in the form of, and functioning as, attempts at solution. One is invested with rational and the other with irrational pride. This means that although it is in our nature to maintain ourselves as a whole—as a unity, as a one self—to do so we must harmonize, though in pseudo-harmony, two systems of mechanisms invested with two different sets of values, one

² K. Horney, *Neurosis and Human Growth*, New York: W. W. Norton & Co., 1950.

³ K. Horney, *Our Inner Conflicts*, New York: W. W. Norton & Co., 1945.

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rational and the other irrational. The values involved are values as to fact, aesthetic and moral values as earlier defined. A central conflict is, then, a conflict between opposing forces—one set of forces moving us toward self-realization and another retarding the motion in that direction. The second set of forces manifests itself in the neurotic process of attempting to actualize the idealized self. Conflict is then a state existing when the directions of forces reflected in systems of mechanisms invested with two sets of values are different and opposing.

A conflict exists between forces and not between the values put on those forces. We cannot have a conflict between rational self-esteem—rational pride—and irrational or neurotic pride. Neither can we have a conflict between irrational pride and irrational self-hate, nor between rational self-esteem and constructive self-discontentment. We can only have conflict between forces invested with these values.

However, by virtue of operating with two different sets of values—and here we are concerned with moral values—we are duplicitous. Although we need to function as a unity, to feel as though we are operating with one set of values, we are in fact operating with two. That is natural. It is natural because no human being is perfectly rational (healthy) or perfectly irrational (absolutely sick). It is then natural to be duplicitous (morally imperfect).

Further, within the system of obstructive forces there is basic conflict. Basic conflict is a consequence of being driven by compulsive forces to move toward, against or away from others for purposes of safety. Each move engenders certain qualities which, as a composite, form the compliant, the aggressive or the detached orientation to life. Each orientation puts emphasis on specific values and we are concerned with the moral ones. But a pseudo-harmony must be created among these three moves, which are forces invested with three different sets of moral values, all irrational. This is done by the creation of an idealized image. The conflict persists among these opposing forces and the individual is du-

plicitous by virtue of operating with three different sets of moral values spuriously harmonized in his idealized image.

Duplicity is only one aspect of the conflict process: that which is concerned with values, specifically moral values. Being duplicitous is, then, an aspect and consequence of being in conflict. A state of duplicity obtains when a person is operating on the premises of more than one set of moral values. Actually, every human being operates more or less on the basis of four sets of moral values. There is one which is associated with moves toward self-realization and three associated with moves away from it. Although compliance, aggressiveness or detachment may be more in the foreground at any one time, the other is always in the background and will at one time or another be in the foreground. Duplicity, then, is always present as an aspect of conflict, as a consequence of conflict and as a state of being. It is present whether it is obvious or not to that person or to an observer.

DUPPLICITY AND THE NEUROTIC PROCESS

Thus far, I have differentiated duplicity from conflict. How is duplicity distinguished from neurosis? If we speak of the neurotic process rather than of neurosis we can immediately see distinctions. The neurotic process is only one aspect of the total life process in the human organism. In the neurotic process, energies are manifested in the form of mechanisms moving an individual toward actualizing the idealized image. Within the structure of that process is basic conflict, and that aspect of duplicity relating to the three moves, in relation to others. The process is only one aspect of the total process which includes the real self-system. Only if the real self-system is included can there be central conflict and can there be a system of moral values of a rational nature. And only then can there be duplicity because of the existence of two moral value systems, one rational and the other irrational. From the above it can be seen that the neurotic process and duplicity are not identical, and also that the comprehensive idea of du-

plicity here presented is not possible without including the real self-system.

Duplicity is present, in general and in specific, in circumscribed maneuvers and employed as strategy. Grossly, there are duplicitous maneuvers with reference to self and to others participated in, with awareness or not, through fear, ignorance, blindness or neurotic pride. There is feeling one way, acting another and thinking a third. Under duplicitous maneuvers are pretenses and deceptions. Facts are presented in an exaggerated, distorted or dramatized form, and at times mixed with conscious or unconscious dishonesties. There are also the deceptions by omission: the presentation of half truths and facts out of context. These maneuvers are often an outcome of, and in the service of, the needs to outwit, to outsmart and to "get away with murder." In short, duplicitous maneuvers obtain where the means are considered to be justified by the ends; where the means often become the ends, and where the means, no matter how immoral and irrational, become exalted into virtues. At bottom, for the justification of duplicitous maneuvers to obtain, there must be cynicism, which means the deriding of moral values and the becoming of a law unto oneself. No matter how cynical a person is, he must believe he, too, lives according to a moral code. Only he is its creator, according to his own egocentric needs, and sole arbiter with reference to it in individual situations. He demands that others must abide strictly at all times by a truly moral code while he arrogates to himself the right to operate according to a private moral system, which may be a secret even from himself, but according to which all kinds of actions and exceptions are justified for him alone.

MANEUVER AND STRATEGY

Because the word *maneuver* tends to carry the connotation of duplicity willfully participated in for immoral purposes and toward irrational ends, it might be reserved for such moves. Such willfulness, we know, is not based on free choice, but on driven necessity, whether in awareness or not. However, such a person would be using

such maneuvers while still over-identified with irrational pride and, hence, would not be able to be constructively discontented with having to resort to them. The term *strategy* might be reserved to mean tactics which are duplicitous, but carried on with moral intent toward rational ends and with a feeling of discontentment that such a dishonest means are necessary. There would be the genuine intent that constructive efforts will and can be made, so that such strategies will become less and less necessary.

The meaning of duplicity, whether as maneuver or strategy, is derived from the individual's starting point or position and his perspective—how he sees himself and the direction in which he is moving. If his position is that of being over-identified with irrational pride—if the majority of his energies are invested in moves to support and increase pride-invested positions, and if he sees himself as a glorious, God-like person driven to become more so—his direction of movement would be away from self-realization. Then he would also be investing specific duplicitous maneuvers with pride. Then we would characterize his duplicity as an irrational immoral maneuver whether conscious or unconscious. If his position is that of being more identified with rational pride—if, now, the majority of his energies were invested in moves to support and increase rational, pride-invested positions and undermine irrational pride-invested ones, and if he is seeing himself as a human being with limitations, and through genuine choice is moving in the direction of self-realization—then he would no longer be investing with pride specific duplicitous mechanisms, but would be genuinely discontented with them and be seeing them as immoral transient necessities. Then we would characterize his duplicitous moves as strategies.

The points I wish to make about duplicity can best be illustrated by dream examples. For a number of reasons, I am using dreams almost exclusively to exemplify these points. In dreams we are creating geniuses. We reflect in them the solutions we are attempting in an adequate,

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appropriate, pertinent and succinct manner. They can portray the points I wish to make more clearly, quickly and accurately than could be done by concrete examples from everyday situations.

DREAMS AS ILLUSTRATIONS

In using dreams as illustrations, it should be kept in mind that they must be understood in context and that attempting to interpret them as isolated events out of context does lead to error. A dream should and can only be interpreted against the background of a comprehensive picture of the immediate and past background. If this is not done, we may get the erroneous impression from a single dream that a person is much further along in his analytic work than is actually so, or may consider him much sicker than a total picture of the actualities would indicate. A person may be dealing quite clearly with a problem in a dream, yet it may be months or years before he can work through the problem in actuality. Or he may reflect in a dream a problem he seems to have dealt with quite thoroughly in actuality. The seeming incongruity might be due to a misjudgment regarding the thoroughness of the working through, or the old neurotic solution might have reappeared as a transient consequence of a considerable forward move prompted by considerable constructiveness. The interpretations of the following dream examples are made on the basis of the broadest available contextual background which cannot be detailed in here because of space considerations.

DUPLEXITY AS MANEUVER

The first example illustrates duplexity with reference to others—operations in relation to others, with two sets of moral values. In this dream the existence and operation of opposing moves—of basic conflict—is clearly reflected. We see this man's move against people in the first part of the dream. In the second part, his move against and away from those same people is made while overtly moving toward a second group of people and covertly moving against them. His move toward people in the

dream and in daily living was a mixture of compliance and pseudo-compliance. In his daily living, his predominant solution to basic and central conflict was to move away. This solution is only slightly reflected in this particular dream, although it occurs in most of his others.

The first dream: "I am involved in a murder as an accessory to the crime. In the immediate past, there was another murder to which I was an accessory but which was never discovered. There is good reason to believe that this present murder will also escape detection, but an element of anxiety is present. I have no compunctions about the crime and I am quite satisfied with the benefits derived, but it seems unfair to me that I had to be incriminated in the process. I could not hide out as the others could. I had a business. I had to appear in public. I had to go to the bank and make deposits and sign checks. I was something of a public figure and any moment someone might step up and accuse me of the crime. Why hadn't those other fellows been able to pull off the job without involving me in the deal?"

In this dream we see duplexity reflected in relation to others. This man clearly has no conscience about dealing with two different groups of people with two sets of moral values. The dream portrayed what he did in his daily life, only there he had his behavior so well rationalized that he saw himself as a saint and an upright, law-abiding citizen. His duplicitous moves with reference to either group I would call maneuvers, because they are in the service of maintaining and increasing pride-invested positions. There is also pride in his duplexity, a cynicism about moral values and not one bit of constructive discontentment that he uses such ways to deal with people. Conflict is little experienced in the dream because of the functioning of the mechanism of compartmentalization. That he is duplicitous is clear in the dream. He is aware of operating with two sets of moral values, one aggressive and the other a mixture of compliance and pseudo-compliance. He attempts to harmonize them by the thinnest rationalizations while becoming

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quite self-righteous and being essentially cynical throughout.

The following is a non-dream example from a common, life situation. It is used to illustrate duplicity with reference to another person through moving away with the intent, thereby, to move against. This we often see in the relationship of a morbidly dependent woman and an arrogant-vindictive man, who frequently has quite a large admixture of resignation in his make-up. Such a relationship is replete with such scenes: she clutching and clinging because of her own anxieties and calling it love, he withholding and withdrawing because of his anxieties and calling it a legitimate desire to be alone. However, he often uses the move away—withdrawal—to intimidate and enslave his partner. He does this when he thinks he might be losing his grip over her because she seems to be losing interest in him, or has dared to become slightly assertive. He talks of leaving her for her good, or because he no longer loves her, or to make her stand on her own feet, which he knows she cannot do. In such a move he is duplicitous and the move is used to maintain and increase his pride-invested positions, particularly that of detachment. In such a move he is overtly operating with the moral values of detachment. Covertly, he is using the moral values of aggressiveness while posing in the guise of compliance. All of these irrational moral valuations are naturally idealized into virtues. While talking of leaving her for her own good, to make her stronger or because he no longer loves her, he is purporting to have, and have had, quite some capacity for genuine concern and affection for his partner. Analytic exploration shows him to have obtained it only to a very limited extent.

DUPPLICITY AS STRATEGY

In the past twenty years, many people in various parts of the world have been forced to use duplicity as a strategy in relation to others. They have used moves toward, against and away from with conscious duplicitous intent and with equal unhappiness that circumstances necessitated such

action. Many men and women of good will have been driven to such strategies to maintain their human dignity and their ideals after having lost many of their number who had been openly rebellious against totalitarian despots. Whenever there is a dictatorship, whether within an individual or a social organism, duplicity as a strategy, as a means to an end, becomes a necessity. The people employing it elect to live and die on their feet rather than to exist and be killed on their knees. They actively wait. They husband their resources. They attempt to undermine their enemies wherever possible. They strike at propitious moments. They keep active, however, as an expression of their faith in the dignity of man, hoping for the time when they can openly rebel and defeat their masters, so that duplicity as a strategy will no longer be necessary.

Their attitude toward duplicity is entirely different from that of dictators. With the latter, duplicity as a maneuver is a highly regarded means justified by the ends. With dictators the means become the ends and are ultimately glorified as virtues. In a dictatorship, duplicity as a maneuver is an integral part of a carefully planned, dehumanizing process. With those living under a dictatorship, who must use duplicity as a strategy, it is an expression of their humanness and is used as a humanizing process, toward the end of an increasingly productive living for all the members of their group and for themselves as unique individuals.

DUPPLICITY AND DEMOCRACY

The problems of duplicity as maneuver and as strategy have considerable social significance for the preservation and deepening of the democratic ideal. Threatened as the democracies are by totalitarian regimes and totalitarian elements in their midst, the necessity becomes all the more stringent for guarding against infringements on the democratic process while putting so much of our energies into a defense against its possible total destruction in the coming years. Democracies must become all the more alert, so that they themselves do

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not verge on the totalitarian and thereby destroy the very democratic ideal they want to preserve and defend against authoritarian threats. By infringements on the rights of the individual—particularly freedom of expression—they will force underground those very elements which would want to destroy democracy. Those persons are less dangerous when allowed to express themselves openly, where they can be countered with cogent arguments from those who not only verbally support, but in fact practice, democracy. Their duplicities as maneuvers will be obvious and can be exposed. When driven underground, they are driven deeper in their justifications of their duplicitousness and, in addition, have been given the prideful role of martyrs for a glorious cause. Operating underground, particularly in a democracy, they are all the more dangerous because it becomes much more difficult to know who, and where, and how many there are of them. The frightened restriction of freedom in the service of defending that freedom has its dangers for truly democratic citizens who will not be intimidated into the cult of loyalty or timorous orthodoxy. They might be driven to duplicities as strategies. They would feel impelled to such actions to hold in check and defeat those persons who, under the guise of vehemently defending democracy, are through fear, ignorance or willfulness attempting to choke off all differences of opinion and create the very totalitarian state they swear they are defending their democracy against.

To clarify duplicity as it manifests itself intrapsychically, I will start with examples where the ratio favoring identification with pride ranges from considerable to moderate. While the ratio still favors the pride side, shifts can be seen favoring an increase or decrease of that identification. How a person sees himself at any point will be determined by the position he holds in the above-defined pride system. His position will determine the form of expression of his duplicitous maneuvers. They may take the form of apparent agreement, or difference, or both simultaneously, with what is rational or irrational.

OVERIDENTIFICATION WITH PRIDE

This example is a dream of a man much identified with his pride and, at this point, out to increase that identification. His duplicitous maneuver was one of apparent agreement with a person who symbolized a pretense of constructiveness and the acme of diabolical trickery. My patient wanted to outwit and outsmart him while operating under the pretense of faith and obedience to his preachings. My patient's duplicity was in the service of increasing his pride in duplicity and cynicism under the pretense of goodness and service to humanity.

The dream: The patient, who is an agnostic, goes to the church of a Catholic archbishop. The patient regards the Catholic Church as the epitome of duplicity and this archbishop as an arch-representative of it. He regards the Church as the acme in diabolical cleverness for giving the impression of existing for the good of humanity, while constantly increasing its temporal power for its own sake and without regard for the welfare of its members. The patient goes with one of his henchmen to the archbishop in his church and says he and his henchman want to be converted to Catholicism. Their attitude is outwardly obedient and humble. The patient's intent is to become a Catholic, so that he can learn their tricks for getting power. Having done so, his intent is to bore from within, destroy the Catholic Church for the good of humanity and himself become the super-power for good.

DUPPLICITY SERVING PRIDE

The duplicity is obvious and conscious in this dream. The form it takes is obvious agreement while obviously differing with Catholicism, but agreeing with what he felt one aspect of the Church stood for. This duplicity was a maneuver in the service of pride and specifically aimed at outwitting and outsmarting. Its intent was to increase the ratio favoring pride.

In this second example, although the energy investment in the pride system is greater than in the real self-system, the

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ratio favoring pride has considerably diminished. In the dream, pride aspects are represented by other people whom we had quite consistently identified in our work as obvious symbols of pride.

The dream: Two figures, one of whom my patient identified as Martin Rogers, come to him very much concerned about his health. They tell him he should first take a vacation for his health and not work so hard. And that he should put off for two or three months an expansion of his business which he had, in fact, projected. The patient could make nothing out of the dream. Martin Rogers is married to the patient's eldest sister who has always been, in the patient's mind, Number One, tops, always right. All of these are aspects of his idealized image. Although Rogers is subordinate to him, the patient always feels intimidated in his presence. Rogers is a symbol for my patient's eldest sister, Clara. The patient often said Rogers must have what Clara has if she was willing to marry him. Martin and Clara are externalized symbols to him of the irrational authority of his own shoulds.

In this dream, the patient is passive. He is left confused and bewildered by the dream, although this feeling is not in the dream itself. By this point in his analysis, he had considerably undermined his pride and his shoulds and in the symbol of his business we were seeing the possibility of projected expansion. Some of this would be in the service of pride but subsequent analytic work showed that it was also in the service of rational expansion. All of a sudden, bewilderingly, the people symbolizing his pride and his shoulds, the people who previously drove him without regard for his health and wanted only irrational expansion now become concerned for his health. They also want him to put off rational expansion even though they lose thereby some of the irrational expansion which would have accrued to pride. The move from the side of pride is a duplicitous one. The duplicity is implicit and not in the awareness of Martin Rogers as expressed in the dream. The form it takes is agreement with the patient when the in-

tent is one of differing with his tendency toward rational self-expansion.

The above two examples illustrate duplicitous maneuvers when the ratio of energy investment is largely on the side of pride. We might speak here of over-identification with pride. The duplicitous maneuvers may be in the service of increasing pride, as the first example indicated, or of slowing up the process of pride undermining, as in the second.

When the duplicitous maneuvers serve to increase pride, they may take the following forms. The maneuver may be an apparent agreement with what is constructive and offer a promise of easy glory and freedom from suffering. This promise is duplicitous because what is promised is spurious and never attainable, and the price to be paid—one's soul—is minimized or not mentioned. These maneuvers may also take the form of differing. They are expressed as threats of desertion by pride if what is constructive is not sufficiently appreciative or obedient. When the undermining of pride has begun, as in the second example, the moves from the pride side may again be agreement or difference with the constructive in order to slow up the process and, if possible, reverse it. The move of agreement we saw in the spurious concern for the patient evinced by the Martin Rogers symbol. Moves of differing run the whole gamut of expressions of self-hate. What is duplicitous is their exaggeration, the frequent use of absolutes, the tearing of truth and half-truth out of context, and often the confusing senselessness and utterly fantastic nature of the lies and distortions which pride hurls at what is real in ourselves.

ENFORCED COLLABORATION

At all times, the collaboration with pride is an enforced one. In the next phase of the process of pride undermining, with the ratio still favoring pride but the margin becoming smaller, pride must be more cautious, as it were, in how it handles the constructive element. It must even offer concessions to what is constructive. By now, part of the person begins to know that it

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wants emancipation. For the time being, however, it apparently collaborates with pride while husbanding its resources against the time when an open rebellion can be dared.

The following dream clearly portrays the various aspects of the problem of duplicity in midstream. It defines how things are with this man as well as the direction he must go. His pride system is symbolized by a dictatorial person who enforces a reluctant collaboration. He makes the patient act as a spy, a duplicitous role. The dictatorial person is, by implication, duplicitous in suggesting that the patient-spy carry out a further piece of duplicity against his friends. These people had regularly been symbols of goodness and simplicity, of family, a sense of belonging and of human warmth. The tyrant then knows of an emerging real self in the distance. I say in the distance because in the dream the atmosphere is of remoteness. Often this is the way a new direction is portrayed in a dream even though it may take months or years to reach that point in reality. All the tyrant promises now are threats for failure to collaborate. This is enforced collaboration. The tyrant and the patient in the dream are in conflict. Their cooperation is an enforced one. The tyrant is moving against the patient and wants him to move against his real self. The patient is in conflict. He wants to move against the tyrant but dares not. He wants to move away from the tyrant and towards his real self but dares not. He is forced to move with the tyrant and against his real self on a destructive basis. The dream ends up in a stalemate with the patient implicitly being duplicitous for strategic reasons, while playing for time and husbanding his resources against the time when he can openly rebel.

The dream⁴ follows: "A kind of far away dream. I was a spy, at the direction of someone else who was my superior. I was writing a letter to the Hyman family in Bridgeport telling them about something. I did not tell them I was a spy, but

that I was on the good side. My pen was scratchy and when I looked there were a lot of blots on the paper. I seemed to have to work with that pen. Something about the pen. I didn't seem to, yet did mind writing with it. Like feeling low, yet not feeling it."

He was asked, "What about the superior?"

"He was standing over me. No feeling of anger toward him. I accepted the fact. There was a jocular business between us."

He was further questioned regarding the superior and the relationship between them. He makes it all right to have a scratchy pen, yet it rankles. He associated to a "should" and to the analyst.

"Some paint is peeling off the wall in my apartment. The jocularity is the way I relate to Martha when I want things to be all right again. When I don't feel secure or close to myself. A good way to keep things going."

The dream reflects the coercion of his superior and the patient's shoulds. The jocularity, as the patient clearly states, he uses when he feels insecure in his relationship with his girl friend to patch things up, to gain time and to again get back in the dominant position. His aversion to writing the letter shows in the scratchy pen, his rankling about it and the many ink blots. His superior makes it all right—forces him to write with the scratchy pen, although it rankles, and to be dishonest and to say that he is on the side of good rather than that he is a spy. His feeling low, yet not feeling it, is part of the remoteness and the alienation from his feelings.

The form of expression of the duplicity on both sides is overt and covert. Most of it is in awareness, although some is not and this is mainly on the side of the patient who is obviously in conflict. The superior is doing more double-talking, the patient more double feeling. Each knows the other is duplicitous and both are out to get the upper hand. The superior is attempting to keep his hold by allowing the patient the concession of continuing contact with the Hyman family, although writing dishon-

⁴ N. Kelman, Example from psychoanalytic practice.

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esties. The patient is keeping up the double-talk in a jocular vein, but sabotaging getting to the writing. The moves from the side of pride I would call duplicitous maneuvers in the service of slowing the process of pride undermining. The duplicitous moves on the side of the patient I would call strategies in the service of stalling for time, while husbanding resources against the time when open rebellion would be possible.

DUPPLICITY AS STRATEGY

This next example clearly reflects overt and covert duplicity in and out of awareness on both sides. The ratio still favors the pride side, but only slightly, because this woman is strong enough to see her pride and shoulds clearly and for what they are—a dictatorship. Also, she attempts to gather her resources to prevent the dictator's success, and even after he triumphs she continues with efforts to rebel and die fighting on her feet rather than electing to live on her knees. What is in the foreground is a putting up with a situation about which she has little choice. That she could not in the dream come to a more constructive solution was due to the fact that a majority of her energies were still identified with, and invested in, collaborating with pride.

The dream: "A military dictator had taken possession of the town I lived in. He had accomplished this by trickery, force, false promises and pretenses. An outstanding pretense had been that he was interested in the welfare of the community. I had tried to warn people, but no one paid any attention to me. Finally, he was in power. We could not even communicate with the rest of the country. We were under constant watch. I had no home, lived in attics and barns. I was thin, starved, dirty and in rags. But I felt alive. I knew that there must be others like me who rebelled secretly. I felt convinced that people could no longer be duped by the dictator. So, I set out to look for other people."

"In the street right near the dictator's house, which had been mine before he took over, I met a quiet, sad woman, much

older than I. All the life seemed out of her. I made a friendly comment. One word led to another and she admitted that she hated the dictator's regime. I asked her to help me organize a rebellion. She agreed, but asked that she be given nothing very big or outspoken to do because she felt too weak and ineffectual. I suggested that she find others who felt as we did and that we would all meet for planning. I felt that such meetings and plans would have to be extremely careful because of the dictator's watchfulness. The longer I observed the more I realized that even his police and soldiers were not sympathetic to him, but were intimidated. I resolved to kill him. I planned to first make his acquaintance, convince him of my ga-ga stupidity and harmlessness, entertain him by clowning and allay his suspicion by being naively helpful. I hoped to be able eventually to go in and out of his quarters freely, as I played the role of clown and liaison with 'his people'. When I had his confidence and trust I would kill him with a weapon of my own fashioning.

"The plan worked very well up to a point. The dictator thought I was harmless, a funny nit-wit. He gave me messages to carry and was quite pleased that the people trusted me. I even flirted with him in a cute way, which he thought hilariously funny, because I was so femininely unappealing in my rags and dirt. He took this as a further sign of my idiotic harmlessness. And I watched for my opportunity. I noticed that his soldiers carried carved canes. Openly I began to whittle one for myself, saying that it would be my gun. The dictator was quite amused. I continued coming every day, regaling him with gossip, silly stories and whittling my cane. At home, I hollowed the cane out so that I could carry a knife in it. From bits of metal I made a knife, constantly keeping in contact with the 'others'.

"Finally, everything was ready. But the dictator was so diabolical that he had a secret method for knowing exactly how many knives there were in the town and he knew that there was one extra—my knife. He immediately suspected that I was

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the culprit. When I arrived that day, as silly as usual, the guards let me in just as usual and I carried on in the dictator's office, chattering and dancing about. He watched me, smiling affably. I suspected nothing. As I was about to pull out my knife, he raised his hand. Guards rushed in and carried me out. I was glad the pretense was over. I felt mature and dignified. The dictator just laughed and said, 'You thought you could outwit me?' I shouted back, 'Someone will. You can't win.' I knew I was going to be shot, tortured or imprisoned, but I did not care. I even felt happy, for I had actually done something instead of just taking the dictator's authority."

In the foregoing dream, we could clearly see the dictator's duplicity as maneuvers in the service of pride and my patient's duplicity as strategies in the service of survival, growth and emancipation. Although the duplicitous maneuvers and strategies are immoral by definition, the functions they served were the opposite and the success of each would move the individual in opposite directions.

In the course of this struggle to free himself from his inner dictatorship, when part of him already knows what is constructive and what is the direction he wants to move, a patient may lose faith in his ability to make it. He may become impatient and look for short cuts.

The next two dreams, two weeks apart, illustrate how a woman by conscious duplicity attempted to steal something constructive (the first dream) under the nose of pride but gave it up (the second) with the realization that even something constructive would be deformed if it were not earned but obtained by dishonest means.

OVERT Duplicity in a Dream

Having, telling and discussing the first dream disturbed the patient very much. She told it to me immediately on entering the office.

The dream: "I had intercourse with you, and after it was over I told you I didn't use a contraceptive. Before, I had

told you that I had one. You slapped me furiously on the face and the shoulders. I didn't know who initiated having intercourse. You were furious, but as you slapped me I didn't have any feelings that I can recall. The symbol of you takes a switch. You mean one thing and then another. I have a strong feeling of that switch. Like you are something constructive in me and then something else. I don't want to talk about this dream any more."

She looked frightened and I asked her if she felt that way. She said, "Yes. I feel frightened. Something has happened this week. I felt more outgoing and moving forward."

In this dream, the duplicity is overt and in awareness. It is using bad means for good ends. The feeling of the shift from me as a constructive symbol to one of hurt pride furiously meting out punishment is quite clear. At this point in her growth, this was as well as she could do, but even so, the consequences were good—namely, her feeling of moving forward during the past week. That there was something constructive in her desire to become impregnated—to make union with a constructive aspect of herself—is indicated by the fury of the hurt pride reaction.

Two weeks later she had a rather long dream of which I shall only report a part. The dream: she went to the bathroom to urinate and noticed in wiping herself that she had to use more and more paper. She thought I'm haemorrhaging and having a miscarriage.

I asked her what she thought about the dream. The first thing she said was "the only thought that keeps coming to me is what you said two weeks ago about impregnation. You said there might be an abortion. My first feeling about pregnancy was destroying something constructive. Yet the blood was black. That's sickness, illness. That would be a deformed child. As if dead anyway."

She agreed with my interpretation regarding the giving up of something gotten by deceitful means and that it left her feeling cleaner and more honest. There had been a number of associations about dirti-

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ness and cleanliness. Right after my interpretation she concluded, "I'm beginning to be able to look in people's eyes and let them see in my eyes." These last associations are clearly a move in the direction of directness, honesty and openness, as against her previous dishonesty and duplicity.

CHANGE FROM MANEUVER TO STRATEGY

Even when the ratio of energy investment is close to 50-50, or even favors the real self-system, a long battle still remains to be fought. The constructive can still be confused and bewildered by the increasing subtlety, deceptiveness and duplicity of moves from the side of pride to slow up the process of growth, and possibly stop it and even produce a reversal. In this phase of the work the interpretation of dreams can be most difficult. Symbols which fairly regularly have been indicative of the constructive become cover-ups for moves from the side of pride. Only by seeing such dreams against the broadest possible contextual background and over a period of time can we become fairly clear about their meaning and understand that we are dealing with most deceptive moves, last-ditch stands on the part of pride to confuse and bewilder by their utter plausibility. In short, the battle against pride is never won. The price of deepening and extending the forces of the real self-system is an eternal vigilance and alertness to more and more subtle and duplicitous maneuvers from the side of the pride system. This is another way of saying that as long as we are living we will have to be dealing with the duplicity in ourselves and also in others. Bringing duplicity into sharper focus, and showing that it is universal in human beings and part of the nature of being human, we can face it in ourselves and see it in others with that much less of the moral condemnation, which causes so much unnecessary pain, blurs our vision and obstructs genuine attempts to become open-eyed in the search for truth about ourselves. As we work at our duplicity, we can approximate closer to what we really could become as uniquely individual human beings.

By dividing up into phases the manifestations of duplicitous maneuvers and strategies appearing in the course of the analytic work, I have hoped only to indicate a gross and approximate sequence. These phases are not actually experienced in any neat, rigid, temporal succession as outlined. The phases can become reversed and confused because of what we know of the ebb and flow in the analytic process. All I am saying is that in the course of an analysis where the ratio of energy investment shifts from one favoring pride to one favoring the real self, these various manifestations of duplicity as maneuver and strategy will become clear.

In the course of the last two phases I outlined, there are many dreams of blind rebellion against all authority, rational and irrational, and, ultimately, dreams in which clear discrimination between these two types of authority is possible. At first there is an identification with a rational authority and, finally, dreams occur in which the patient himself is the one who is capable of rational authority.

SUMMARY

In this paper I have attempted to define duplicity and differentiate it from neurosis and conflict. I have attempted to distinguish duplicity as maneuver and duplicity as strategy, and to indicate the forms duplicity takes in various phases of the analytic work, depending on the extent to which the ratio of energy investment favors the pride or real self system. I have done this to mitigate the deleterious effects of the generally held, one-sided, destructive meanings attributed to the term duplicity, and to do so by expanding and revising the concept to indicate the general existence and detailed manifestations of moral dividedness, or moral imperfection. With such a tolerant, constructive understanding of this moral issue, unnecessary pain can be mitigated and more energies made available for constructive discontentment with, and work on, this problem in ourselves, whether in self-analysis or in psychoanalytic therapy.

SMARTNESS AND STUPIDITY IN NEUROSIS

BELLA S. VAN BARK*

IN THIS PAPER I wish to focus on problems associated with pride in intellect. In one group of people, over-emphasis on intellect is in the foreground and feelings of stupidity must be hidden at all costs. In another group, the over-emphasis is on feeling stupid and all evidences of pride in intellect must be hidden and shunned.

There are healthy people who live constructively and are genuinely and sincerely devoted to the scholastic life, as well as to the expansion of their powers of comprehension of themselves and the world about them. Those who use their intellectual powers constructively are motivated by natural impulses to enlarge their sphere of communication with others in mutual appreciation, growth and enjoyment. They have an interest in searching for the truth and really believe that "the truth shall make you free and only the free can find the truth."

The healthy person is relatively free from compulsiveness, hostility, false solutions and rigidly held illusions about himself. He is free to check with the evidence both without and within, in arriving at conclusions or decisions. He consults himself and his feelings for value judgments as well as his reason and logic. He can tolerate flaws in his intellectual powers and uses his energies toward a better understanding of

the situation at hand. As Horney states, "the intellect is an opportunist at the service of whatever interest carries the greatest weight." When the mind is used in the service of self-realization, the individual works at uncovering the truth alone and with others in a spirit of humility.

MacMurray, in "*Reason and Emotion*," says: "Thinking is not living. At its worst it is a substitute for living, at its best a means for living better. Thinking can never do more than improve our knowledge of the facts of a situation, and even this is difficult where our emotions are strongly aroused, because the emotion itself tends to make thinking difficult or to pervert it if the emotion is unreasonable." This clearly states my belief that the intellect is the subordinate partner nourished by the emotional life.

In our culture there is a great stress placed on knowledge for knowledge's sake. Intellectual knowledge can at best give us information about things. When put together with emotional knowledge, we then really know something.

Overstreet considers the crucial factor in maturity to be the linkage of knowledge with the situation in which a person finds himself. He focuses on dispelling the current belief that "if enough people are educated in the knowledge of the what,

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the why and the how of things, all will be right with the world." It is valid that factual knowledge is important. In essence, valuable knowledge is that knowledge which is used to solve a problem, not to prove that one is right. Our value judgments of right and wrong are emotional in nature. Our feelings are central and fundamental to our human experience and growth. It is not uncommon to find in the neurotic patient who invests false pride in knowledge that although he may acquire a great deal of knowledge about himself, the linkage process is for various reasons only slightly operative. The knowledge remains in his mind and is unrelated to his situation. A patient who had been talking about how much she knew about herself and her problems dreamed, "I saw cards hung on a line outside of my window and each one was labeled a problem."

EMPHASIS ON "SMARTNESS"

Our cultural fostering of the smart way of life as the "normal" way is shown in our media of communication. We emphasize "using our heads wisely," learning quickly. We admire the facile speaker, the one who is quick on trigger. We support the wisdom of being realistic, alert, and taking care of oneself. Although the culture fosters attitudes towards smartness as in the direction of normality, the individual attitudes towards smartness are mainly a reflection of inner emotional needs and are not a direct transfer from the culture. There are many people who do not subscribe to the values that the culture and the neurotic individual place on smartness.

Some of the cultural dogmas which emphasize the smart way of life are ably presented by Lynd. We are told and taught how to get by, get what we want and avoid trouble from our parents. Lynd says "human beings have become very adroit in thinking up good reasons to explain what they do habitually." I do not consider this true for the person with a healthy interest in searching for the truth, but it is true for the neurotically involved person who relies on his mind to maintain his inner unity on its spurious basis. Lynd shows that

our culture, by supporting the thesis that man is rational and can trust to his reason to guide his conduct, tends to dismiss the basic emotional motivations. He feels that we rely too much on the rational omnipotence of human beings and leave too many decisions up to man's precarious ability to use his head. In this way some of the "comforts of unreason" are perpetuated; in particular, those comforts which are stressed in a competitive, aggressive society. Favorite American prototypes are the smart shopper, the smart dresser, and the quick and nimble-witted fellow who can talk circles around others. Ours has been aptly described as the culture of the know-how and the know-it-all.

Our educational system, with its culturally-influenced attitudes toward learning and the value of knowledge, quick learning and the correct answers, plays its part in the importance attached to the mind by the neurotic individual. Both teachers and parents whose philosophy of life is dominated by the principle of the rightness of their wisdom, opinions, reasoning, logic, standards and principles contribute their share to the individual neurotic overemphasis on smartness. Although the child may sense discrepancies in the adults who express and permit no doubts about their beliefs and reasons, he has no way to fight except by becoming at times even more expert in his rationalizations and more clever in his ways of fending off the pressures of coercive righteousness.

OVEREMPHASIS ON SMARTNESS: SOURCES

The individual who invests his mind with enormous pride values lives in the belief that he can solve all problems through the omnipotence of his reason, logic, thinking, foresight and planning. Variations exist in regard to the degree to which reason and logic are depended upon. Some people experience themselves as perfect minds. They drive themselves toward the perfection of their intellect. There are those who believe their reasoning, logic and knowledge to be infallible. There are other individuals who belittle every aspect of their intellect and experience themselves as just plain

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stupid. In general, although a neurotic person may be compulsively driven toward the actualization of his smartness, he may not consciously regard himself as very intelligent. Those who overemphasize smartness may actually have good minds. The good mind itself, however, is not the source of the phenomenon of overemphasis on smartness.

Personal experience, natural endowment and life influences contribute an important share to the direction of personality development in both healthy and neurotic individuals. Some of the factors which seem to encourage the constructive use of the mind are the support and freedom given the child to satisfy his natural curiosity to learn, to raise questions and seek help in solving problems, as well as freedom to test his conclusions and to express differing opinions. These factors help the child to develop respect for his intellectual powers and their use in searching for truth.

In neurosis, we see excessive pride invested in omnipotence, reasoning and logic. When this occurs we can invariably trace back to destructive attitudes in the early environment. The child may have been exposed to excessive praise and admiration for his quick wit, good grades and precocious remarks, or he may have been ridiculed and humiliated for his lack of knowledge, or for not showing "common sense." Often, implicitly and explicitly, rigid standards for reasoning, logic, planning and foresight were imposed by coercive adults. These children were denied respect for their strivings to develop other potentials than those related to intellect. Being smart became necessary in the struggle for existence in the family milieu. Often the child's actual smartness was exploited in quarrels between the parents.

The most important source which feeds the neurotic overemphasis on smartness and perpetuates it lies in the predominant developmental direction taken by the character structure. Those who have adopted the expansive solution to inner conflict, and particularly those who live in accordance with the arrogant-indictive philosophy, are more likely to exhibit this belief

in the power of the mind in the mastery of life.

OVEREMPHASIS ON SMARTNESS: ITS AIMS

There are many reasons why the individual emphasizes smartness. Neurotic concern with being smart is in the service of fulfilling underlying real and neurotic needs. Such an individual's outstanding inner needs are to sustain a feeling of strength and power, a feeling of self-sufficiency and the inner conviction of having complete mastery over his feelings and emotions. He must check fears, maintain control, and is forced to eliminate all self-doubts about his absolute mastery over himself. He uses his mind to eliminate, dismiss and erase any awareness of compulsion, contradictions and inconsistencies. His mind becomes the main instrument in the service of wiping out feelings of weakness or helplessness, and the major basis for feelings of superiority and competence.

What does the neurotic individual who places such belief in the supremacy of the mind expect of himself? Primarily, he expects himself to *know*. To illustrate, a man became panicky when he realized that all his efforts to reason away anxiety and morbid thoughts about his physical pains did not succeed. He almost believed that his inability to do so was an evidence of intellectual deterioration. He expected his mind to function so efficiently that it would raise him to a position of complete independence from physical ailments. He could not accept human limitations in the power of reason and logic. He dreamed of a man with glassy eyes who clicked answers in his eyes. He said to himself, "He can't see but he knows the answers."

Those who overemphasize smartness use their reason to restore inner unity by eliminating emotions which interfere with their equanimity. They pride themselves on their rationality, reasonableness and foresight. They are extremely alienated. The smart mind is the only value left to them. Their capacity for enthusiasm, enjoyment of life, and a sense of inner life are considerably diminished.

The individual who overvalues knowl-

edge and thinking in the service of feeling alive and powerful may feel hazy and unreal and often extremely anxious in intervals when he is not working hard at thinking through a problem. One patient said, "If I cannot know everything then I might as well die. What else is there for me?" When this woman was unable to curb her rebellious child by reasoning with him and explaining her requests, she considered herself a total failure.

All these factors make him sensitive to questioning, disagreement and opposition. Sometimes he experiences questioning as an impugning of his pride in his honesty. He has an extremely low tolerance to errors, flaws or being in the wrong, and is driven to prove his point without regard for the truth. Often, he has lost a feeling for truth. He loses respect for his actual intellectual and personal assets as well as his actual accomplishments. The mind has been assigned the responsibility for living and performing. He may experience himself as a head on a stick. The head becomes a receptacle and, as in one fantasy, seems divided against itself, with the person reduced to a half-alive embryo in which only the brain is pulsating.

FUNCTIONS OF SMARTNESS

The overemphasis on smartness serves to fulfill the needs associated with the aggressive-competitive-vindictive way of life. It is natural for human beings to want to get ahead and make progress in their lives, to want to compete on the basis of their merits, to accomplish and to share their accomplishments with others. In neurosis, the mind can become the major weapon. The patient uses his mind to show his superiority and gauges others by their intellectual superiority. Intellectualism becomes a way of life. Thoughts are used to impress and charm people, with the emphasis on understanding and wit. Reason is used to point up cleverly the shortcomings and errors of the other person and to show how right the neurotic individual is. The intellect is used to triumph over others.

In analysis the patient who invests his mind with fantastic pride expects to be

given knowledge which will help him to perfect his idealization of the perfect mind. He believes that knowing is enough for the solution of his problems. Awareness should effect change. When a factor is brought to his attention, he may say, "I know that now. So what?" He may emphasize how much he realizes something about himself and feel that talking about it should be the end of the difficulty. He cannot tolerate intellectual difficulties, and is terrorized by unconscious forces which threaten his sense of mastery. He finds free association ridiculous because it brings out contradictions.

He exhibits a passion for getting by without conflict, outwitting and frustrating the analyst by raising unrelated issues and barrages of argument. He repeatedly talks about right and wrong, but is almost blind to even the most flagrant contradictions in himself. At times he may rationally agree with the analyst, thus strengthening his own pride in rationality. He may admit faults but leave the problem untouched.

The analyst must tell him what he does not know, for "not knowing" is experienced as a humiliating defeat. He wants to know what is right or wrong and then he can maneuver and restore his position of mastery. He may bring in dreams and want to know what the analyst knows or sees in them without doing any work himself.

Tackling pride in intellect, knowledge and logic is helpful for it reduces the self-hatred attached to "not knowing." His disparaging, vindictive, frustrating trends are often not experienced as such. Realizing how the patient experiences himself is of considerable value in the therapeutic approach and the analyst's response to the patient's irrationalities and rapid-fire smartness in avoiding recognition of unconscious processes.

OVEREMPHASIS ON STUPIDITY

Overemphasis on stupidity in neurosis can become as much a way of life as "smartness." Whereas the person who is proud of the perfection of his mind cannot tolerate any self-doubts, the patient who stresses stupidity presents a very different picture.

Here, in the foreground we note an em-

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phasis on being stupid. These individuals have the subjective conviction that they cannot reason or think as well as others, that their ideas are of little value and that they just are stupid. The compulsive devaluation of the intellect is in context with the philosophy of the self-effacing orientation. There is overemphasis on stupidity, associated with inner needs for love, acceptance, affection and closeness. The neurotic individual who lives with the subjective conviction of intellectual inadequacy appears to make his feeling of this weakness the basis for getting near people in a dependent way.

I am not referring to people who have actual intellectual limitations. All of us have warranted occasions when we feel stupid and actually have not used our intellectual faculties positively.

FEELINGS OF STUPIDITY: SOURCES

Repeated failures to satisfy the requirements supporting the idealization of the intellect lead to reduction of self-confidence in intelligence and emphasis on stupidity. Early life experiences also contribute a share to the individual's stress on stupidity. Frequently, such an individual was greatly influenced by the admiration bestowed on one of the important adults in the family, and lived on crumbs in the reflected glory, or shadow, of this person. The adult unconsciously exploited him for personal admiration. This can contribute to the compulsive move towards people for affection.

In one patient, I observed an early attempt to win favor from the intellectually superior and greatly admired father by being smart. Continual failures to be successful while competing for the father's favor turned this person in the direction of resignation. Her next move was to stress stupidity. Actually, she possesses very good intellectual powers which are unused.

The culture contributes a small share to the emphasis on stupidity often found in female neurotic individuals by fostering dependency drives as "normal" for women.

What process is taking place in the person who stresses stupidity? He believes he

cannot think as well as others, is prejudiced against his own reason and discounts his own fund of knowledge.

What seems to have taken place where the feeling of stupidity occurs is a persistent, bludgeoning process intra-psychically. The neurotic individual suffers from having beaten himself down to a point where he becomes deaf and blind both to his real intelligence and real strivings as well as to the perfectionistic demands of his secret pride. In addition, he is hampered by taboos on really using and showing his smartness. He is compelled to deny himself awareness of his healthy ambition. He talks a great deal about his feelings. As a result of neurotic forces, largely self-destructive trends, he loses the capacity for making inner connections. The emphasis on stupidity makes him unaware of their actual emotional coldness, lack of spontaneity and lack of good feeling for others.

FUNCTIONS OF STUPIDITY

In relation to self, the functions of keeping oneself stupid are largely in the service of stilling the battle between the real self and the 'proud self'. The real self is kept under surveillance. Emphasis on stupidity and ignorance is one defense against experiencing terrorizing self-recriminations as well as the possibility of disapproval from others. One woman said, "At least if I insist I am stupid, no one can expect anything from me, and I can't possibly be that stupid."

Stupidity becomes the basis for appealing for help to those who appear stronger, smarter and wiser. In this way the individual hopes to achieve some vicarious living as well as reflected glory from association with those he considers intellectually superior. Thus, he partially avoids the pressures from inner coercions connected with repressed ambitious drives, as well as the impact from self-belligerent trends.

Emphasis on stupidity may be used by the neurotic individual as a way of avoiding aggressive moves in relation to others, subduing vindictive drives and diminishing the possibility of friction or hostility. Stupidity becomes unconsciously the basis for

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claims for exemption from assuming responsibility and for exemption from blame. Stupidity may be used insidiously in the service of manipulating others and winning favors. Thus he may achieve his goal of finding a partner who will take over and eliminate the need to resolve his own conflicts.

In emphasizing stupidity, the individual divorces himself from his actual assets and suffers from an enormous waste of good potential. His further real loss lies in the destruction of his natural wishes for communication with others. He may appear to have a greater feeling for the truth about himself and for healthy moral values. This is not true to the degree to which he experiences it.

The neurotic individual who stresses stupidity presents special problems in therapy. He listens respectfully and admiringly, and expresses gratitude for what is offered by the analyst. However, he quietly and unconsciously dismisses what is said by not responding and blinding himself to inner

connections. At times, these individuals appear to have the courage to not understand. And the analyst may mistake their humility for a much more genuine interest in working at themselves than actually exists at the time.

The objectives in therapy would be to reduce the anxiety about intelligence and to help the individual to use his actual potential toward self-realization in which the intellect assumes the position of an important asset.

CONCLUSION

Neither absolute doubting of the validity of what others say, nor absolute acceptance, are healthy ways of using the intellect. In both instances real thinking is avoided and self-idealization increased. Unfettered thought, with real courage to make efforts at understanding, could express an ideal for analytic work as well as for living and growing. This is one of the freedoms an individual accords to himself and others, in the search for truth.

THE FEAR OF RELAXATION AND LEISURE

ALEXANDER REID MARTIN *

THE FOLLOWING DEFINITIONS from Webster form a necessary preface to this presentation:

"Relax—to remit attention or effort, to become less diligent, to unbend, to seek recreation or rest."

"Relaxation—a recreative state, diversion, recreation. Abatement, slackening, ease and rest."

"Leisure" is closely connected with relaxation, but has a more extensive and more general application and implication. It is defined as follows: "Opportunity and freedom to do something. Time free from employment. Time at one's command. Free from engagement. A period of unengaged time and ease."

Three sources of interest prompted this paper. First, it follows as a natural sequence the general trend of the ideas and formulations in my papers on "Effort,"¹ "The Body's Participation in Anxiety and Dilemma Phenomena,"² "Reassurance in Therapy,"³ and "The Dynamics of Insight."⁴ Secondly, several years ago, the American Psychiatric Association formed a Committee on Recreation. Within the past few years, the name of this committee was changed to the Committee on Leisure Time.

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¹ Martin, "Psychoanalytic Contribution to the Study of Effort," *American Journal of Psychoanalysis*, Vol. IV, 1944.

² Martin, "The Body's Participation in Dilemma and Anxiety Phenomena," *American Journal of Psychoanalysis*, Vol. V, 1945.

³ Martin, "Reassurance in Therapy," *American Journal of Psychoanalysis*, Vol. VX, 1949.

⁴ Martin, *The Dynamics of Insight*, paper read before the American Psychiatric Association Meeting, Cincinnati, 1951.

of self-deception. The term "leisure" has unquestionably fallen into disrepute. To try and restore dignity and respect to this almost forgotten and so frequently misused term, I draw your attention to the following quotations:

"Leisure is the best of all possessions." Socrates.

"Leisure with dignity," Cicero describes as the supremely desirable object of all sane and good men.

"Sweet recreation barred, what doth ensue
"But moody and dull melancholy
"Kinsman to grim and comfortless despair,
"And at her heels a huge infectious troop
"Of pale distempers and foes to life." Shakespeare.

"Leisure is the mother of philosophy." Hobbes.

"Increased means and increased leisure are the two civilizers of man." Disraeli.

"To be able to fill leisure intelligently is the last product of civilization." Bertrand Russell.

So the poets and philosophers for thousands of years have agreed on the supreme importance of leisure. But modern man apparently cannot avail himself of this blessing. With more leisure time available, there is a lessening capacity to enjoy it and to use it creatively and constructively. Modern man finds he cannot relax to order. This paradox primarily concerns psychiatry and psychoanalysis, and presents us with one of our most immediate and greatest challenges.

THE GENERAL PROBLEM

By relaxation, I have in mind mainly mental, or emotional, relaxation rather than muscular relaxation, although, from a holistic standpoint, I do not lose sight of total relaxation as the desired and natural phenomenon. The complete inability to relax, even for a moment, is a common

complaint and evidence of neurotic disturbance. Many individuals have the ability to relax at the end of a strenuous day's work. Others, when they leave work, are highly irritable, restless, moody, dizzy, and have many vague and transient physical complaints. Others try to induce relaxation by alcohol, by the cocktail before dinner, with occasional temporary success. Weekends and holidays for many have proved to be extremely upsetting. The so-called "Sunday neurosis" is a clinical entity which is said to be on the increase, especially in metropolitan culture. It has been noted that many spasmogenic conditions of the gastro-intestinal tract have become much worse during holidays. I have one patient who for a considerable time has been under treatment for duodenal ulcer. With him, all his gastro-intestinal complaints become severely aggravated when he goes off on vacation. Another, with spastic colitis, has had similar experiences.

Coronary spasm has been aggravated during such periods. This phenomenon calls for a revision of our whole attitude toward work and rest in the cause and treatment of certain acute heart conditions. Contrary to some of the old medical text books, it is not always at the peak of effort, or during moments of severe strain, that attacks of "angina pectoris" invariably occur.

On occasion, severe psychoneurotic and even psychotic episodes have occurred when an individual attempted to rest after a particularly long period of intensive work, and there have been occasional suicides in these circumstances.

There are other patients who can rest on holidays, but only when they have the doctor's prescription, the doctor's advice. They cannot give themselves permission really to rest or let down. They have to turn to and rely upon the outside authority. They are, as it were, victims of a compulsive, authoritative regime. This can either be an inner or an outer regime, or both. In either case, a system of bargaining develops. Work and play become part of a reward and punishment philosophy. Rest is something that has to be earned. All of this smacks

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of a philosophy dominated by the God of vengeance of the Old Testament and not the God of mercy of the New Testament. They become involved in defying and then placating the gods, or the outside authorities. One way of dealing with this situation is to take a rest—go off on a holiday—but then proceed to be rather miserable and unhappy and see to it that there is no enjoyment.

The real difficulty in these instances is not only in taking a vacation, but in thoroughly enjoying it. In so far as rest and relaxation take place under the aegis of some authoritative system, whether inner or outer, we should ask whether this should be thought of as true relaxation. Some can relax only when they have a physical illness. One patient said, "If I got sick, I'd take up the cello." At another time, he said, "I'd be delighted to write an article, if I catch cold and have any spare time." The psychosomatic implications here make it difficult to differentiate cause and effect. There are many instances of creative and artistic abilities revealing themselves for the first time during illness or convalescence when there was enforced relaxation. Accordingly, all our ideas about what constitutes leisure, rest and relaxation, and their value, must be revised and re-examined. The old standby prescription for so many so-called nervous breakdowns—to "take a rest"—cannot be dispensed indiscriminately. Inseparable from our subject is the great problem of retirement, the besetting and critical issue in industry and in geriatrics. The life insurance companies are well aware of the rapid disintegration that may take place soon after retirement, and their statistics in this regard provide a most valuable contribution to this whole study. A post-retirement follow-up will show that all forms of total personality disturbance, organic, emotional, intellectual, moral, can develop especially in individuals whose philosophy of life prohibited true healthy relaxation and the enjoyment and creative use of leisure time.

In a very broad and general sense, we are dealing in everyday life mainly with what could be called compulsive living,

rather than leisurely living. Leisure, relaxation, meandering, wandering, "a pause in the day's occupation," all create anxiety, especially in metropolitan culture. So we can say with the poet Davies, "A poor life this, if full of care, we have no time to stand and stare." So-called sports, recreation, pastimes, bridge, etc., are not indulged in leisurely, but compulsively, by too many individuals.

RELAXATION AND INSIGHT

E. D. Hutchinson, in a series of excellent papers on "creative insight,"⁵ collected voluminous autobiographical data from practically all the great creative thinkers of the past and present: the great artists, writers and scientists. He demonstrated very convincingly that the experience of sudden creative insight, the so-called "aha" phenomenon, *never* occurred during the peak of mental effort, but always during a period of relaxation. This is also true in my experience of the "aha" phenomenon and the insights occurring during analysis. What constitutes relaxation has to be discussed, but, in general, Hutchinson found that following a long period of what he calls "obsessional" preoccupation with a problem, during which nothing was accomplished and there was considerable frustration, the creative thinker finally relinquished the problem completely. After he had relinquished this compulsive preoccupation for a period of weeks, or months, the whole answer would come to him out of the blue. Hutchinson calls this period of relaxation the period of renunciation of the problem. At the time of relaxation, the thinking changes from the systematic or dialectical mode of thought to the intuitive or mystical. We should keep Hutchinson's interesting analysis in mind during the later discussion of dynamics.

Hutchinson describes it as follows: "Suddenly, usually in a moment when the work has been temporarily abandoned, or when the attention is absorbed by irrelevant mat-

⁵ Hutchinson, "Variety of Insight in Humans," *Psychiatry*, Vol. II, 1939; "Studies in Creative Endeavor," *Psychiatry*, Vol. III, 1940; "The Nature of Insight," *Psychiatry*, Vol. IV, 1941.

ters, comes an unpredicted insight into the solution—usually interpreted as a reorganization of the perceptual field, especially in regard to the relationship between means and end. As if 'inspired' or 'given,' ideas arise which constitute the real integration of previously accumulated experience—an answer, a brilliant hypothesis, a useful hunch, forming, it seems, a shortcut to artistic or scientific advance. Owing to the suddenness and the apparent revelation of new material, the experience is mistakenly looked upon by some as unrelated to past experience." During this second period of Hutchinson's, when compulsive preoccupation with the problem has been abandoned, it is important to note that there is a great increase in psychosomatic, physical and hysterical symptoms. In other words, during this phase of relaxation there appears to be more body participation in the whole process engaging the individual.

As analysts, we must ask what enabled the individual to relax, to relinquish his compulsive, obsessional preoccupation with his problem? What led him to give up his intellectualizing? We must ask this because we know in everyday analytic work that compulsive intellectual preoccupation with one's internal problems is a characteristic symptom of a great many of our patients. Unquestionably there is a fear of letting go, a fear of relaxation. Unfortunately, Hutchinson did not discuss the factors that helped the creative thinker to relinquish or relax his compulsive thinking, but he did point out that the capacity to do this, to give up the obsessional preoccupation, was a prerequisite for all insight and creativity.

THE PROBLEM OF SLEEPLESSNESS

We must consider fear of relaxation as temporally and causally related to many forms of sleeplessness. This is of special significance at the present time when there is such widespread, indiscriminate dispensing of soporific drugs, particularly those that act upon the thalamic and the hypothalamic centers. These centers are more concerned with perceptual than conceptual functioning, and with the somatic concom-

mitants of emotional expression.

The fear of relaxation can be equated with the fear of going to sleep, the fear of the dark, the fear of anesthetics. All of these have been related to a fear of the unconscious. It would perhaps be more comprehensive to say that in these instances there is a fear of the conflicting impulses and feelings that would emerge into consciousness if the individual relaxed his conceptual, logical, compulsive thinking. For such an individual, it is imperative to be alert, to be in full command of his senses. While he stays awake he maintains his way of living, his neurotic defense against the emergence of conflicts which, for some reason, have become imminent. It should be pointed out that it is awareness of total involvement in conflicts that the individual protects himself from. We see here that drugs that act upon the thalamus prevent the individual from becoming aware of the extent of his involvement in conflicts.

We have the simple, old, compulsive ritual of counting sheep recommended as a means of helping sleep. One explanation of this in line with our thinking would be that the person thereby sets himself a task which is unemotional, by means of which he keeps the cortex alert in a rhythmic, orderly fashion. While this sharpens the focus of consciousness, it greatly narrows its field and the imminence of total involvement in conflict is thus diminished.

One patient, now having frequent insights, experienced the return of an old, repetitive nightmare in which a "presence" came into her room with a knife. He came towards her, so vivid and real that she sat up and turned the light on. This reminded her of an old, frequently recurring dream of a "presence" coming from her parents' bedroom, a grinning "presence," getting larger as it came towards her bed, green and red and mottled color, a smothering figure. Because of this and similar dreams, she was afraid to go to sleep at college. She kept herself awake by constant obsessional concern about her dress, her clothing, what she would wear the next day, what she called her facade. After staying awake for

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hours doing this, she would finally get into bed with her roommate. She told it as follows: "I meant to talk of this before. When I was in college, I had such bad dreams. I went to Molly's room, not being able to sleep, scared to death. I'd start to think of what I was going to wear. Everything had to be perfect. Just fanatic. I could not stop thinking about it. It got the best of me—obsessed with keeping that exterior facade. There could not be one single flaw in it. Oh, I remember so clearly now." It would seem very obvious from this, that becoming completely obsessed, preoccupied with this compulsive ritual was a means of keeping her conflicting impulses from coming into consciousness. She associated the "presence" with jealousy. The old idea that by this compulsive ritual she keeps a repressed wish, impulse or memory from consciousness in my opinion should give way to the new thought, that what is thus kept from awareness is her total involvement in conflict.

One patient, when her conflicting feelings about me began to arise, found herself counting, or thinking of arranging, the books on my bookshelves in some orderly fashion.

Another patient also had a great fear of going to sleep. She became terrified and panicky when night would fall. By drinking very heavily, she lost this fear of going to sleep. On two occasions recently, when she was not drinking, this fear of going to sleep returned and would start as soon as night approached. Now, she has improved to the extent that the fear of sleep only comes on when she thinks of preparing for bed. Nightfall, darkness, bedtime no longer bring the fear; only when she thinks of actually getting into bed and going to sleep. In these instances, this patient did not use any conceptual, compulsive ritual to avoid awareness of total involvement in conflict, but, rather, she resorted to detachment by means of alcohol, because she invariably drank until, as she put it, "she passed out."

We still know little about sleep. There is evidence that sleep can be an escape, an escape from a compulsive form of living, a

kind of rebellion or defiance. Or, we can also use sleep as a reward for compliance. However, as I mentioned before, I question whether such sleep, or such relaxation that comes about in this fashion and which definitely is related to some compulsive, authoritative system, should really be regarded as true relaxation and healthy sleep.

We can return to the earth, return to sleep, to the past and to darkness, not as an escape, but as a means of going into the darker reaches of ourselves, to extend our awareness, to get closer to ourselves. Sleep is not primarily an escape, although it can be used as such. We go into the darkness to get light, just as the French scientists—the Curies—went into the darkness, the primitive, primordial darkness and mud, into the black pitch of night to get radium. In sleep, present merges with the past and the past with the present. Sleep is basically reassuring, but where there are serious conflicts, sleep can be an escape—that is, a superficial or symptomatic means of reassurance through return to the past, a return to dreams. In this category, we have the concept of the return to the womb, but determined by anxiety and not by instinct.

CORRELATIONS WITH DEPENDENCY AND SURRENDER

We can see how a fear of relaxation is also related to a fear of depending on anyone or upon anything. The need to be "wide awake" and "on the alert" we see strongly marked in many so-called self-made men and women, who have complete inability to depend upon others. Here is one compulsion that our culture constantly mistakes for a virtue, and glorifies as self-reliance, independence and individuality. It is a compulsive independence, based upon a fear of dependence upon others. This is certainly tied up with the inability to surrender to one's own conflicting feelings and impulses, and indicates a deep self-distrust and inability truly to relax because of the imminence of intense emotional conflicts.

True relaxation in the sense of a surrender to one's own basic, intrinsic, unique rhythm is not an escape, but brings us in touch with the darker reaches of ourselves

and gives us a greater sense of our totality. Here surrender does not mean submissiveness. For this kind of surrender is extremely difficult, or even impossible, when the patient is beset by severe internal conflicts. With the ability gradually to withstand consciousness of total involvement in these conflicts, the individual loses one self, but at the same time, he finds another, a greater self. This gets close to the kind of healthy, positive relaxation which would be part of leisurely living. Appropriate at this point is a quotation from Robert Frost:

"Something we were withholding
made us weak
"Until we found it was ourselves
"We were withholding from our
land of living,
"And forthwith found salvation
in surrender."

We gain an interesting sidelight on surrender in certain falling dreams. Individuals who have been subject to falling dreams of nightmare quality reach a point on occasions where they cease to fight or struggle against the fall, and allow themselves to surrender to the falling sensation. Immediately, the anxiety quality of the dream disappears and they no longer awaken. We, of course, would have to ask what was going on at this particular time to enable them to surrender to the falling sensation, just as we have to ask what made it possible for creative thinkers to abandon their struggling, and their compulsive thinking, which abandonment was a prerequisite for insight.

True relaxation seen as a surrender phenomenon should not be confused with the euphoria, the feeling of great understanding and benevolence towards all mankind, that characterizes the so-called positive transference relationship. This occurs when all authority is set up outside oneself and is analogous to jumping into the lap of the gods. In this same connection, true relaxation and surrender should not be confused with the experience of identification or merging with the cosmos, often mistakenly referred to as being at one with God. The latter, as I see it, is not an integrative

process, but a merging process which involves complete loss of uniqueness and identity. The process here should be seen as one implying continuity. This is not in accord with the truly integrative process of surrendering to one's own basic unique rhythm. Here we can truthfully say that he who loses himself, finds himself, and the process should be seen as one implying contiguity.

One person equated fear of relaxation with a fear of idleness. He could not bear to think of himself as unoccupied. This prevented him from finishing anything. He always found more and more to do and, thus, kept postponing the possibility of idleness. For instance, while working on project No. 1, he would have project No. 2 or 3 in mind. He felt if he became idle, he would sink into inertia. "You spend time doing crosswords, reading magazines, playing cards. The trouble with that is that it's pleasant. You get into imagination. You live in the imagination. Becomes more and more difficult to get out of." He said, "If you're not living compulsively, what happens to you? There is something about imagination. It is too pleasant. That is why it perpetuates itself—like being addicted to a narcotic."

THE PROBLEM OF IDLENESS

The condemnation of idleness, as expressed by "Satan finds mischief for idle hands to do," stems from dualistic concepts of the individual and a belief in an inevitable, innate, basic inner conflict. From a holistic point of view, the growth process is at all times operating, all conflicts and dualisms are acquired and we can say with Emerson that "a man does not know when he is idle." We can also say with Rousseau that man by nature is good and only his institutions are wicked. One patient said, "If you keep busy all the time, you won't get into trouble." This applies, however, only to those who are beset by severe internal acquired conflicts. Individuals so affected with internal conflicts must work and play compulsively and never leisurely. John Ray said long ago, "Idle folks have the least leisure." Much of what is termed

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idleness, laziness, or inertia stems from unconscious compulsions to defy and rebel against the demanding "Gods" set up by the individual himself.

If the term "leisure" were substituted for idleness then the following statement by Robert Louis Stevenson⁶ epitomizes the main theme of this presentation: "Extreme busyness, whether at school or college, kirk or market, is a symptom of deficient vitality; and a faculty for idleness implies a catholic appetite and a strong sense of personal identity. There is a sort of dead-alive, hackneyed people about, who are scarcely conscious of living except in the exercise of some conventional occupation. Bring these fellows into the country, or set them aboard ship, and you will see how they pine for their desk or their study. They have no curiosity; they cannot give themselves over to random provocations; they do not take pleasure in the exercise of their faculties for its own sake; and unless Necessity lays about them with a stick, they will even stand still. It is no good speaking to such folk; they cannot be idle, their nature is not generous enough; and they pass those hours in a sort of coma, which are not dedicated to furious moiling in the gold-mill. As if a man's soul were not too small to begin with, they have dwarfed and narrowed theirs by a life of all work and no play."

A point of confusion arises between being relaxed on one hand and being uninhibited. The processes involved here have to be carefully differentiated. Being uninhibited should be thought of in terms of being free from something. It involves setting up some authority toward whom the individual is then compliant or defiant, but never free—never really free. Being uninhibited can be seen, then, as an escape from the demands, the perfectionistic demands that are imposed by such an authoritative system, inner and outer. True relaxation is not a release from inhibitions and is completely unconnected with a compulsive, authoritative system. When the individual

is able to say and to feel that convention, schedule or routine is his slave, then the compulsive needs to defy, comply or rebel do not arise, and healthy relaxation and leisure become possible.*

Relative to the confusion between escape and true relaxation, James Thurber, in his foreword to *The 13 Clocks*, begins as follows: "I wrote *The 13 Clocks* in Bermuda, where I had gone to finish another book. The shift to this one was an example of escapism and self-indulgence. Unless modern Man wanders down these byways occasionally, I do not see how he can hope to preserve his sanity."⁷ One has only to read *The 13 Clocks*, with its profound wisdom and philosophy presented in a most simple and provocative style, to recognize that this is a real creative masterpiece and, as such, could only have been a product of true relaxation and not escape. The true creativity expressed in this book expresses a greater closeness to life and its conflicts, rather than an escape from it.

RELAXATION AND ANALYTIC PROCEDURE

This whole problem of relaxation has a most significant bearing upon the entire psychoanalytic procedure. We have the very marked and widespread inability of many patients to relax during the psychoanalytic hour, and their great difficulty in reaching anything like free association. We see in this connection that one of the ultimate goals in psychoanalysis is to overcome the individual's fear of relaxation.

My brief remarks so far have concerned themselves much more with posing this whole problem than with providing any answers or solutions. However, dynamics something like the following suggest themselves to me.

CONSIDERATION OF DYNAMICS

Some sort of fixed routine-schedule pattern, a kind of straitjacket, is absolutely

* Approaching the problem as one involving relaxation of control and repression will be discussed in a subsequent paper.

⁷ Thurber, *The 13 Clocks*, New York: Harper, 1950.

⁶ Commins, *Selected Writings of Robert Louis Stevenson*, Modern Library Giant.

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essential to a great many people who are beset by severe internal conflicts. This routine becomes a self-imposed, inside and/or outside authority, in relation to which they are compliant or defiant, but never really free. These individuals are unable truly to relax and make constructive, creative use of leisure time. Leisure and relaxation for them is a kind of freedom, gained by conformity to a pattern, or else rebellion against a pattern. It is always freedom from something and never freedom for something. This is not true relaxation or leisure. Real leisure time, or real freedom from routine for those who are beset by severe inner conflicts, sets up terrific anxieties. Without the authoritative, compulsive regime, consciousness of total involvement in severe conflicts becomes imminent. We must realize the great number of our people who do not want to be really free to act, or free to think, or even free to feel. They must set up external authorities. They want to be told. Work, for many, is a necessary straitjacket. Once out of this straitjacket, conflict involvement becomes imminent, and if they cannot for some reason immediately resort to a compulsive system, they resort to detachment.

It will perhaps throw a new, helpful light on the dynamics of relaxation if we see our whole problem primarily as one involving consciousness and think in terms of a relaxation of consciousness during which thinking tends toward the perceptual, mystical, alogical and non-teleological. During contraction of consciousness, thinking becomes conceptual, logical, dialectic. We have then a kind of diastole and systole of consciousness which, in the healthy individual, alternate rhythmically. This healthy rhythm becomes disturbed when the individual is beset by inner conflicts.

From a holistic standpoint, all inner conflicts are acquired and these must, at all times, involve the whole being, structurally and temporally. Consciousness of this total involvement in serious conflict is an anxiety ridden experience, difficult to withstand. A protective contraction of consciousness occurs which now limits the

manifest expression of the conflict to the conceptual area of functioning. The individual becomes the subject, as it were, of a compulsive, dialectic, rigid, logical system, with great interference in his sense of wholeness and autonomy. Of this person, it could be said that he knows too much and feels too little.

In a sense, relaxation, as far as it applies to abandonment of compulsive thought, can be seen as an abolition of a narrow range of highly focused, logical consciousness. There is an expansion, or a relaxation, from this to a kind of more diffuse and broader focus of consciousness, so that consciousness now extends beyond the conceptual function and involves the whole being. The relaxation process, if thought of this way, can be seen to be different from escape, or being uninhibited. Rather than escape, it means getting closer to one's whole self. It means acquiring a greater sense of one's wholeness and totality.

Healthy relaxation, as it was observed in the creative thinkers at their moments of insight, and as we would wish it gradually to develop in the course of the psychoanalytic procedure, can be seen then as a gradual expansion from one kind of sharp, highly focused, but limited area of conceptual awareness to a more diffuse, but totally involving awareness. Consciousness of greater wholeness expands, *pari passu*, with the individual's ability to admit (feel) the extent of his involvement in conflict.

CONCLUSIONS

Certain holistic premises give us a helpful approach to the whole problem of relaxation. The holistic approach is to be regarded as one of many avenues to the whole problem of relaxation and leisure time. Substantiation for the holistic premises derives from the work of Jan Christian Smuts, Smith Ely Jelliffe, the Gestalt School of Psychology, the basic philosophy of John Dewey, and the embryological findings and formulations of the Coghill School at the Wistar Institute, Philadelphia. For the Gestaltists in particular, their basic orientation is best expressed by Prasad, who says

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that "Eros is the striving toward consciousness of greater and greater wholeness."

Our basic holistic premises are:

- 1) Internal, acquired conflicts involve the whole being temporally and structurally.
- 2) Consciousness of this total involvement in severe conflict is an intolerable, anxiety ridden experience from which the patient finds protection by contraction of consciousness. The terms dissociation and repression have been used to express this protective process, also the term "lowering the level of consciousness."

It would seem that localization of conflict in the conceptual area of functioning characterizes our culture. Thinking along these lines, we can see here a contrast to the nineteenth century, where somatic localization of conflict was more frequent, as expressed in the hysterical conversions. Glorification of compulsive intellectuality has led to a cultural perpetuation of this contraction of consciousness to the conceptual area of being. We note that fear of relaxation is particularly applicable to those unable to relinquish a logical, dialectic approach to reality.

A patient can be helped to relax consciousness by the non-teleological approach which means less and less questioning in terms of "why" and "how" and more direction of the patient toward "what" is going on. Our basic desire in analysis should be to get more and more of the whole being into awareness. To bring about what Goethe called "living in the all." Memory, reminiscence, reverie, musing, free association are part of the true relaxation process, with the recall of conflicts, rather than the recall of incidents *per se*, as the important objective.

While the holistic approach does not in any way substantiate the Freudian theories, it would definitely subscribe to the Freudian procedure of free association and the avoidance of a persistent, logical, dialectic

approach. Also, in assisting the patient to relinquish his compulsive, logical thinking in favor of free association, reverie and random soliloquizing, one can recognize a similarity to what the Freudians term "analyzing the super-ego." Only an approach which places equal emphasis upon past and present can be regarded as truly holistic. The individual's totality is to be seen as a dynamic continuum, a dynamic pattern in time, with the present in the past and the past in the present.

In therapy, during the course of this expanding and diffusing of consciousness, which I have correlated with relaxation and free association, if the requisitioning of past experience is only slight, the intellectual and rational elements of the insights will naturally predominate. The patient's capacity for feeling profoundly, for speaking with conviction, for being whole-hearted, humble and honest in his work will be limited. On the other hand, if during the process of relaxation and the expansion and diffusing of consciousness, the recovery of material from the background of experience is more extensive, the imaginative and emotional elements will be more manifest in the insights. The patient will tend to occupy himself as do the great originators in any field with the speculative, the hypothetical and the symbolic. Here there is a drawing upon the resources of the totality.*

The microcosmic process of relaxation during effective analysis is analogous to the macrocosmic phenomenon of the Renaissance. There was a relaxation of the rigid orthodoxy of the Dark Ages. The resurgence of creative effort, the sudden development and expansion of man's awareness, and man's fuller personality during the Middle Ages followed upon an acceptance of the past and a recognition of the past in the present. There was at last an inclusion of what is earthy and worldly in the total consciousness. Humanism asserted itself, as it must do in all healthy relaxation and all successful analyses.

* In this paragraph I have borrowed heavily from Hutchinson.

PSYCHOANALYSIS
AND
THE CONSTRUCTIVE FORCES IN MAN

*A symposium sponsored by the Auxiliary
Council to the Association for the
Advancement of Psychoanalysis*

SPEAKERS:

HAROLD KELMAN, M.D., *Moderator*
KAREN HORNEY, M.D.
PAUL LUSSHEIMER, M.D.
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Henry Hudson Hotel

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PSYCHOANALYSIS AND THE CONSTRUCTIVE FORCES IN MAN

HAROLD KELMAN, *Moderator*

The topic of this Symposium is *Psychoanalysis and the Constructive Forces in Man*. With my opening remarks I wish to introduce the subject and indicate the spirit of its meaning.

In an article in the March 4, 1951, Sunday *New York Times* entitled, "The One Question: Agreement with Russia?", the writer, Mr. Taylor, an Oxford Don, said: "To put the argument on a more general plane, the way to reach agreement with the Russians is to have confidence in ourselves—confidence that we can conduct our political affairs with wisdom; confidence that human beings will not fall victims indefinitely to the fallacies of Communism; confidence that the democratic cause can always afford to be tolerant and patient . . . Nothing is lost by argument even if it goes on forever; after all argument is itself a form of agreement."

How can we identify and increase our confidence in ourselves and in our fellow men? What is the nature of the democratic cause? How is it that argument is a form of agreement? These questions can best be answered by identifying some of the attributes of the democratic way.

For one thing the democratic process not only implies but clearly affirms the right and the responsibility to become informed. As you become informed you have the right to see alternatives. You have the responsi-

bility to dare to make choices and to speak up and be heard according to your own convictions. You have the right to be silent or, put otherwise, you cannot be forced to be a false witness against yourself or others. It is not only your privilege but your responsibility to fight for the right of others to do likewise. And as you gain for others those privileges you will feel free to agree with them or to fight them on all issues pertaining to the best means not only for preserving, but deepening and extending, the democratic way of life. Then your arguing will in fact be a form of agreement.

Democracy will not become a reality by thinking of it as a beautiful abstraction, or by believing that as it exists today in the United States it is a finished and perfect product. But democracy can become an actuality by serious attempts to act democratically in all the details of our daily living as individuals, as family and community members, and as citizens who believe our vote counts and who make every effort to make it count. To the extent that we live and grow as democratic human beings, to that extent will our confidence in ourselves and others increase.

And as we have confidence in ourselves as informed citizens, we will dare to speak out, as many men and women of good will already have, against "the cult of loyalty." Alan Barth in his book, *The Loyalty of*

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Free Man, speaks out cogently and resoundingly against this cult which he accurately defines as a "fear-bred mass compulsion that tends to exalt timorous orthodoxy and to debase the exercise of personal and intellectual freedom." Our President and the men around him have given a definitive answer to problems of defending ourselves against Communism and subversion while preserving individual rights by setting up the Commission on Internal Security and Individual Rights, headed by former Admiral Nimitz.

And, finally, what are the sources from which can spring this confidence? They are the constructive forces available in all of

us. It is the task of the speakers this evening to identify and strengthen the constructive forces in ourselves as individuals, as family and community members and as fellow citizens, so that argument as a form of agreement can become a continuing and extending reality, not only for ourselves but for the human beings on the other side of the Iron Curtain. For there, also, are men and women of good will, fighters for freedom, people with constructive forces in them, who seek and await the support of our confidence and our strength to the end that this world, physically one but ideologically divided, can truly become one world—a world for human beings.

THE INDIVIDUAL AND THERAPY

KAREN HORNEY

We believe in the inner dignity and freedom of man and in the constructiveness of the evolutionary forces inherent in man. The main question I am raising is, "How do we, as psychoanalysts, come to work with the concept of constructive inner forces moving us towards self-realization?" We presuppose the existence of these forces in every human being, although they may not be visible and although there exist elsewhere many beliefs concerning the destructiveness of man. There are not only wars, but the process of the dehumanization of man, such as exists in a police state where a human being is a number and not an individual. The subordination of the individual man and his dignity to an abstract idea, whether this goes on in a police state or elsewhere in the world, is a real danger.

In view of all the destructive greed and corruption going on around us, we have to ask ourselves whether it is Pollyanna-ish for us to believe in, and to base our therapy on, the concept of constructive inner forces. Is the individual inherently destructive, as the Freudians claim?

We are not denying the existence of destructive trends in patients as evidenced in hostility, vindictiveness and selfishness. But we deny that their presence means that man is innately destructive. They are reac-

tions to distress beginning in childhood. Observation and study of the growth of children gives us plenty of evidence that children brought up in a favorable environment grow in a wholesome way to become responsible, mature adults whereas those raised in an unfavorable milieu show describable developmental patterns of hostility, suspiciousness, isolation, pessimism and illusions.

Observation of our own therapeutic work reveals that even in individuals with no overt evidence of obstructive or destructive tendencies, we, as analysts, can see these trends showing through the veneer of friendliness. Though we may see in some patients open suspiciousness, hostility, greed, abused feelings and egocentric demands on others, we know these are not the basic problems. If we come to understand how such a person experiences life we would say that any person like that would have to be destructive. We, therefore, try in our therapy to change the way he experiences other people and life itself, and we are able to effect such a change. Now we see his hostility and suspiciousness disappear, according to the extent that experience is not distorted neurotically. Constructive forces, such as a real wish to develop one's real potentialities, to do creative work, to de-

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velop good human relationships and to be considerate of oneself and others, are then free to express themselves.

The individual who has lost contact with himself has to prove he is something he is not. If he no longer has to prove this because we have undermined his illusions during successful therapy, then he eventually asks, "Who am I?" He becomes interested in his growth and actively wants to be himself. This desire does not stem from our suggestion. We see it arise earlier, before he has expressed it consciously, when he relates his dreams. The desire to be himself grows within him now that it has a chance to grow.

There are many people who share these beliefs such as the educators who have learned that it is not enough to give chil-

dren education; they must be helped to become constructive human beings. The Eastern philosophers, who have always believed in the spiritual powers of man, have seen these powers develop as man stops violating his nature.

Psychoanalytically, we can trace step by step the process of becoming destructive or constructive. Evidence is present in our work, as well as in general observations made on the lives of individuals not being analyzed, that bitter, pessimistic and destructive people can and do again turn towards life. In psychoanalytic therapy, however, we can observe this process in greater detail and can distinguish between what is genuine and what is spurious. This process bears fruit in the individuals arriving at a healthier and better way of living.

THE FAMILY

PAUL LUSSHEIMER

We believe that current talk and fear that the family as an institution is doomed to extinction is grossly exaggerated. Our attention is being directed, however, to the threat posed to the health of the family institution by the neurosis of our time. This neurosis is a group ailment starting in one member of the family, and affects all the other individuals in the group just like an infectious disease. Psychoanalysts, aware of the futility of attempts to preserve the family socially and economically unless mental hygiene is also practiced, are increasingly uniting with those educators, clergymen, social workers and public servants in the field of politics, who consider survival of the institution of the family a supreme task.

The psychoanalyst is interested, for a number of reasons, in efforts to protect the family institution from disintegrating. First, he is aware that the family is an indispensable social unit standing between the individual and the larger group—namely, state, nation or world. If the family as an institution were abolished by a law, or some other force, it would be re-established soon afterwards for the satisfac-

tion of indispensable emotional needs which are far from material in nature. Secondly, the family institution is the most valuable training and testing ground for the individual. It is the medium in which every individual, young or old, finds an opportunity to experience his capacity to live with others and with himself. It is also the medium in which the foundation is laid for security and happiness. Family life is as important for the adult as for the child. Man's growth continues as long as he lives and character formation is a never ending process. Keeping pace with the ever-changing conditions of the world around oneself serves to protect us against the damaging influences of our culture—against the formation of a neurosis.

The family stimulates mobilization of the constructive forces needed for the proper functioning of the individual and of the larger unit in addition to activating anti-destructive forces. By anti-destructive forces we mean all the energy used to combat the frustrations which the structure of a culture imposes upon an individual. In preventing harm to the individual and to society, a basis is laid for satisfactory expres-

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sion of the constructive forces. If for example, in our culture, uninhibited competitiveness, or the disproportion between wishes and their fulfillment, leads to anxiety formation and diminished effectiveness, the anti-destructive forces of the family unit can counteract these most effectively through the feeling of belonging, which helps the individual gain strength against outside dangers. Belonging is more than a biological or sociological condition. Its strongest element, without which no complete happiness and security are possible, is the emotional bond in man. Its healthy development prevents the feeling of being unwanted and of rejection.

Only if all the anti-destructive forces are fully mobilized can the constructive forces within the family unit operate effectively. The goal of mobilizing constructive forces within the family is the creation of a set of moral values and its maintenance for its own sake rather than for any external ulterior motives, or because of compulsions. Too often today we see people who lack a solid, healthy set of moral values acting selfishly or inconsiderately toward their fellow men because no written law blocks them. These people need the written law; they do not have the law in themselves. This points to the two pillars on which the whole edifice of man's morality has to rest: the sense of responsibility and the feeling of respect.

The psychoanalyst, helping to activate or re-activate the constructive forces of his neurotic patients, finds that what these persons are suffering from is a deficient sense of responsibility toward others and toward self, a distorted feeling of respect for others and a lack of self-respect. The roots of this evil can be found inevitably in the family from which such a person comes. Quoting St. Matthew: "A good tree cannot bring forth evil fruit, neither can a corrupt tree bring forth good fruit . . . by their fruits ye shall know them."

All too often, persons who, according to biological or social standards are called a family, live under one roof like boarders, with no other interest than their own. The parents may be good providers materially,

but genuine love is absent. The excuse used in this situation is that the need for material survival absorbs the parents so much that little time and energy are left for the healthy emotional inter-relationship which makes for good family life.

In some families, the father, being too much of a dictator, suppresses the normal development of the other family members. In others, the father is a perennial adolescent who evades his duties as guide and mentor of his family. There is the career mother who, for economic reasons or in her search for glory, becomes absorbed in her work and has no time for her family. Or the mother who, with her overpowering neurotic love, takes possession of her husband as well as her children and deprives them of opportunities for natural adjustments.

Although externally life in such a family may not seem to be greatly disturbed, the inner repercussions for every member may be considerable. The actual destructiveness is not as deleterious as the lack of stimulation of the constructive forces resulting from the lack of teamwork in the family.

We have to think of the family as a democratic institution, where every member has certain rights and certain duties. Every member of the family has to be included in the activities according to his capacities and will, accordingly, feel needed, wanted and important. The result will be growing understanding in a healthy give-and-take relationship. A person, whether adult or child, who has no opportunity to participate properly in family life, loses interest and becomes negligent. His sense of responsibility will be impaired: either he will lose it or will develop neurotic, pseudo-responsibility with which he will tyrannize his environment. In addition, he is in danger of feeling unworthy, or he will create in himself a feeling of false pride, concomitant with a lack of respect for others.

From the foregoing, it becomes clear in what way the constructive forces in the family can be cultivated and how they contribute to the mental health of the individual. In healthy family life there must be

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a balance between give and take, between rights and duties, between wishes and their fulfillment, between reward and punishment. One-sidedness and inconsistency lead to insecurity.

The family must also be the place to experience life in all its facets: there should be room for rejoicing and celebration, as well as for the common experience of grief.

Every member of a family must be educated to evaluate realistically the social and economic status of his family and its possible changes so that every member becomes flexible enough to cope with unexpected changes. The interdependence between the members of a family should not become a dependency to the extent that the offspring is unable to separate and form an independent new family unit.

From these constructive behavior pat-

terns, security results within the individual and in his relationships. The moral strength which every member of the family carries with him permits adjustment to the conditions of his environment. The self-respect and the feeling of responsibility for self yield healthy respect for others and an acceptance of responsibility in the community.

Though the statistics show that there have been significant changes in the family situation through the tendency toward smaller families and increase in divorce, the family has not lost its significance as a most important unit in the structure of society. All our efforts must be bent toward the task of making this unit the moral mainstay of society, because the destiny of the people is closely related to the moral situation of the family.

THE COMMUNITY

ALEXANDER REID MARTIN

My comments stem largely from my personal experience in metropolitan New York youth clubs and settlements that are "homes from home" for thousands of children and youths. Out of the wealth of information and impressions which I gathered, I have prepared a brief formulation which I think has some pertinence and meaning for this symposium.

Humans being human, there is no ideal family life. There is only the satisfaction in striving for the ideal. Parents, afflicted with anxiety, create problems for their children. We cannot take away these problems, or, if you wish, these challenges, nor would we want to, because, in adapting to and overcoming and resolving these problems and challenges which are unique in degree and variation, though not in kind, the individual develops his unique disposition, temperament and character. Psychoanalysis and only psychoanalysis can see to it that these challenges and problems are not perpetuated, accelerated and aggravated by a blind and insensible extra-familial culture. Thus, our function as par-

ents and figurative parents becomes one not of protecting children from problems and challenges *per se*, but protecting them from extremes.

I find that emphasis upon the formative influence of the family has tended to overshadow the equally powerful extra-familial relationships. Exclusive emphasis upon the family with its genetic implications has led to neglect of the relationships that are operating here and now. Consideration of factors perpetuating healthy and unhealthy patterns necessitates constant focusing upon the immediate present. When a youth leader says, "What should I do?" we must say, "Let's first find out what you are doing, and what really is your responsibility."

Figurative parents in the community (teachers, doctors, ministers, club leaders, youth leaders, employers) are not aware of, and have not been sensitized to, the potency of their formative influence on character and have not been helped to recognize their responsibility in this regard. This has resulted in the prevailing great demoralization of parents, who are constantly being

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led to think they are 100% responsible for the character development of their children. To give leaders an appreciation of their present value in the formation of character is the most important factor in promoting their morale and total well being. Present plans to make community orientation an obligatory part of psychiatric training will permit us to convey to the leaders of the community the insights and positive, hopeful, holistic philosophy which we have acquired from Dr. Horney.

Leisure time agencies (settlements, neighborhood houses, boys' clubs, recreation centers, playgrounds) have great unrealized potentialities for good, especially in the metropolitan areas. A great many children have more sustained contacts with these leisure time "parents" than they have with their own parents. These formative contacts take place under the most natural conditions that can exist. Compared to the school and kindergarten, which are artificial systems superimposed upon the child, we have in the leisure time situation the best opportunity for a natural history study of children during their most plastic years—from six to 18—and for an unobtrusive study of all their most important formative relationships.

In psychoanalysis, the neurotic individual is helped toward healthy, inter-dependent growth and greater awareness when the analyst is able to avoid the inadvertent perpetuation of the old patterns and refuses to play the role, or roles, that the individual tends to thrust upon him. Here, the analyst is dealing with someone who is seriously involved in an unhealthy pattern of living, and this requires highly-specialized training and sensitization. However, the same basic principles used by the analyst are capable of adaptation to everyday relationships and can be understood and used to deal with early and simple social, pathological conditions, without the intense training and experience necessary for the psychoanalysis of neurotic individuals.

The paramount problem of psychoanalysis in the community today is the development of benevolent, firm, predictable and dependable leadership to counteract the in-

stability, transiency, uncertainty and unpredictability found in so many homes. To help provide healthy figurative parents and to activate their latent knowledge, we psychoanalysts must bring the attention of community leaders to the following insights:

- 1) New concepts of the growing individual as basically social and already an integral part of the social body at birth, so that the discipline so necessary today stems from love and respect for the child, and not fear of the child. The child is born with a sense of order, harmony and rhythm. Development and growth as an effective, creative, social being does not result from the curbing, inhibition and sublimation of instinctive, destructive impulses, but from a refinement of what was in the beginning a crude, but a socially-integrated being.
- 2) Recognition that "the need to have the child like me" has a subtle and disruptive effect upon all discipline and, because of the prevailing anxiety of modern times, which brings with it a great need for affection, this is perhaps the greatest obstacle to firm and healthy discipline. It places all relationships between leaders and children upon a bargaining basis, paves the way for claims and counter-claims, strong crushes, violent jealousies and rejections.
- 3) The necessity to avoid the unconscious, unwitting or inadvertent perpetuation of the problems or challenges that confront all children in our modern culture—exploitation, over-protection, male-preference, rejection and deprivation as well as unhealthy attempts of children to overcome problems.
- 4) The differences between com-

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plementary neurotic relationships (unproductive) and creative healthy relationships (productive). For example, the aggressive, dominating mother unconsciously perpetuates the dependency of her only child while, at the same time, the child perpetuates the authority and domination toward which it then reacts compliantly or defiantly. The aggressive, dominating business executive who has to have others dependent upon him, finds himself surrounded with compliant, obsequious "yes men." Such an executive and his employees complement each other and, between them, unconsciously perpetuate an unhealthy pattern which ultimately terminates, very often, in some violent, drastic way. Where one partner in a relationship deviates extremely, the other plays an extremely complementary role. Between them, a vicious, interpersonal pattern is perpetuated which does not promote real healthy growth, but remains a wasteful pattern at a level considerably below the basic potentiality of each.

- 5) In adopting the therapeutic dictum, "Perfect love casteth out all fear," leaders must learn to differentiate between root care or unconditional love, which is every child's right, and the neurotic need for unconditional acceptance and recognition.
- 6) The mechanisms of reaction, over-reaction and externalization. We can help leaders differentiate defiant thinking and compliant thinking from free thinking, and learn to overcome the false pride that prevents them from recognizing their own over-reactions.
- 7) It is possible to differentiate between healthy competition, which is competing to improve, and unhealthy (neurotic) competition, which is competing to prove.
- 8) The leader must try to distinguish between healthy and unhealthy friction in the whole process of protecting and developing the uniqueness of every individual, including himself.
- 9) Leaders need to be interested in more of the growing person than his physical and intellectual being. His interest must be in the total being. There is a particular need to build up the whole idea that each individual is as unique as his fingerprints. Each carries in the uniqueness of his fingerprints the concrete visual evidence and the promise that he has a unique contribution to make to life. It is in this connection that there is a paramount need to help the growing individual to participate and become totally involved in healthy conflict with his equals. This healthy conflict results naturally from the fact that there is a unique difference; that this unique difference is the source of healthy friction and healthy conflict, out of which comes emotion and warmth and real creativity.

There is constant confusion between equality and identity which results in conflicts and misconceptions. That each individual is unique is unquestionable. The problem arises in helping the individual to accept this uniqueness, because with its acceptance, healthy conflict with others naturally results. Leaders themselves must have come to grips with their own inner struggles. Only in this way can they constructively participate in the conflicts of the community. Going out to meet life means

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to face the contradictions, incongruities and inconsistencies of life.

Healthy conflict, or friction, arises between individuals who are active and free thinking. Unhealthy and explosive friction takes place between those who are compulsive and reactive. The rough and tumble everyday play of children represents healthy conflict and friction. Thousands of young boys between the ages of six and 13, during an informal interview, were asked "What's the most fun with your brother?" The great majority answered, "Fighting with him on the bed." All too often this

healthy conflict and struggle in play in children is invested with malevolent meaning by the interfering and neurotic bystanders or parents. Competing to improve, rather than prove, is part of the healthy friction or conflict of life.

It is in the great heterogeneity of the congested communities of American metropolitan life that we see the healthy and unhealthy conflicts and frictions. In the efforts of psychoanalysis to mobilize the constructive forces of man in community life, we must emphasize the need and value of healthy conflict and friction.

THE WORLD

FREDERICK A. WEISS

In deciding to speak about "The World" as my part in this Symposium, I was well aware that by some it might be considered presumptuous for a psychoanalyst to attempt discussion of a problem of such magnitude. It is true that social, economic and political forces which transcend the field of individual psychology are involved, but these are not abstract nor impersonal forces of nature. They are human forces and their actions reflect human motivations. Since psychoanalysis is concerned with human motivations, it is, therefore, not only the right but the duty of the analyst to study and evaluate these larger aspects. When a friend of mine recently said to me, "This whole world, filled with irrational anxieties and hostilities, belongs on the psychoanalytical couch," he did not mean that the whole world should be analyzed. What he really meant was that to get real peace, we need more than political changes: we need changes in men themselves. "Wars start in the minds of men." Psychoanalysis can help, therefore, in preventing war.

Modern psychoanalysis no longer sees wars as the inevitable result of the workings of the death instinct, or of competitive aggression rooted in anal-erotic drives. We agree with Julian Huxley that "human nature contains no war instinct." We believe that in human nature there are constructive

forces moving toward growth, self-realization and peaceful cooperation with others. History shows at least as many examples of constructive cooperation as of destructive aggression. Mankind could not have survived unless, again and again, courageous cooperation against the threats of nature had prevailed. That this drive of the real self toward healthy growth and constructive cooperation is not always manifest does not disprove its existence.

In 1814, Thomas Jefferson wrote:

"Some men are born without the organs of sight, or of hearing, or without hands. Yet it would be wrong to say that man is born without these faculties, and sight, hearing, and hands may with truth enter into the general definition of man. The want or imperfection of the moral sense in some men, like the want or imperfection of the sense of sight and hearing in others, is no proof that it is a general characteristic of the species. . . . I sincerely believe in the general existence of a moral instinct. I think it the brightest gem with which the human character is studded, and the want of it as

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more degrading than the most hideous of the bodily deformities."

Hostility, the drive toward self-glorification and vindictive aggressiveness develop not as expressions of the healthy real self but of that defense structure which is formed in reaction to early basic anxiety. To prevent or reduce hostility and aggression means, therefore, to diminish this basic anxiety; and this not only within the family but within the community, the nation and the world. Any kind of racial, social and religious discrimination must contribute at least as much traumatically to the creation of basic anxiety and hostility as a tyrannical father or an overprotective mother.

The problem of "War or Peace" today is only part of the bigger problem of human goals. Like the individual, nations are faced with the alternative of moving either toward genuine self-realization, which includes constructive cooperation with other nations, or toward self-glorification, which must inevitably lead to vindictive aggression and war.

The self-realization of a nation can mean nothing less than the self-realization of all its members. As John Dewey expressed it: "Democracy has many meanings, but if it has a moral meaning, it is found in resolving that the supreme test of all political institutions and industrial arrangements shall be the contribution they make to the all-around growth of every member of society." Dr. Horney said much the same thing in analytical terms. "Only that political regime which gives as many individuals as possible the freedom to strive toward their self-realization is worth striving for."

This principle of self-realization is clearly implied in the basic human rights of life, liberty and the pursuit of happiness. Liberty for a nation, as for an individual, has not only the negative meaning—freedom from tyranny—but just as the concept "noblesse oblige" meant 150 years ago that there are obligations in nobility, so today, in the period of democracy, "liberte oblige" means there are obligations in liberty. They

are responsibility to ourselves and responsibility to others. Lack of this responsibility endangers liberty itself. The way to the totalitarian state is paved by citizens' wishes to escape from the obligations of freedom even more than by the expansive power drive of the dictator. A spirit of self-effacement or resignation leads them to avoid this responsibility and often makes them look for vicarious satisfaction through participating in the self-glorification of a "leader."

Self-glorification prevents healthy growth in a nation as well as in an individual. It leads to the formation of a spurious, idealized image of uniqueness and superiority, demanding rigid compliance under all conditions. Orwell describes this well in *1984*. Spontaneity and creativity have to be suppressed, because they endanger the precarious, inner equilibrium. In terms of national life, this is exemplified in the regimentation which the totalitarian state has to impose upon its citizens. The desperate attempt to maintain the self-glorified image, at all costs, leads to the accumulation of anxiety and self-doubt and to severe inner conflict. Solution of this conflict is sought by the means of externalization, expansion and vindictive aggression. Scapegoats must be found inside as well as outside the nation. Viewed from the fantastic height of the idealized image, members of a minority, or of another nationality, appear small and without individuality; they become stereotyped scapegoats. Thus the Nazis, intoxicated by the image of the "master race" stigmatized and despised as "Un-German" not only minorities, but those Germans who did not subject themselves completely to their tyranny.

Self-glorification in a nation, as in an individual, is inevitably followed by a complete distortion of moral values. Only that is "good" which serves the process of self-glorification, even though it may be inhuman and contradictory to the very essence of what might be called the genuine character of a people. Those whom the Nazis labelled "Un-German" saved what could be called the "real self" of the German people, as it has found expression in

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figures like Goethe and Beethoven. Self-glorification entails alienation from the self, in nations as well as in individuals.

Even in a democratic society, the destructive drives toward self-glorification may coexist with, and endanger, the healthy, constructive forces striving for self-realization. One of the first danger signals is invariably the rise of intolerance against members of minorities. The coexistence of different nationalities within a state need not lead to conflict, as is exemplified by the cooperation of the French, German and Italian citizens of Switzerland.

The principle of creative self-realization applied to the nations of the world can lead to their peaceful cooperation, permitting the full variety of individual character. As Karen Horney formulates it, "self-realiza-

tion does not exclusively, or even primarily, aim at developing one's special gifts. The center of the process is the evolution of one's potentialities as a human being; hence it involves—in a central place—the development of one's capacities for good human relations."

From a psychoanalytic viewpoint, the goal remains the same, whether we focus on the individual, the family, the community or the world. The goal is to help to increase the number of human beings whose real self is not so weakened by anxiety, hostility and neurotic pride that they need either the crutches of dependency or the dope of self-glorification; who are strong enough to want and to take on the responsibility for themselves, their fellowmen and the one world we live in.

BOOK REVIEWS

NEUROSIS AND HUMAN GROWTH: THE STRUGGLE TOWARD SELF-REALIZATION. By Karen Horney, M.D. 391 pp. W. W. Norton & Co., \$4.50.

A FULLER AND DEEPER understanding of his own nature is properly a matter of vital concern to every human being. Second only in importance to this concern is the increasing interest being taken by many in the origin, development and character of that total disturbance of personality to which the term neurosis is given. *Neurosis and Human Growth* is in my opinion the most important psychoanalytic contribution to our understanding of the nature of the human organism and of its neurotic development since the basic work of Sigmund Freud.

Dr. Karen Horney, in her four previous major works,* has stated her conviction that the human being is not naturally destructive. Particularly in *Our Inner Conflicts* did she present her view that destructiveness to self and others is a neurotic phenomenon, a result of anxiety, of neurotic conflicts and the defenses against anxiety and conflict. She contended that freed from their neurotic entanglements, human beings strive naturally to live constructively with and for themselves and others.

This optimistic and constructive view of human nature constitutes the central theme of *Neurosis and Human Growth* and is, I believe, its single most important contribution. The basic postulate of this view is

that there exists at the core of the human personality a dynamic principle—the real self—which strives ceaselessly to realize the human potentialities inherent in it.

Self-realization is a dynamic process, an innate striving to fulfill the capacities and potentialities with which all human beings are born, as well as the individual potentialities which make each person unique. It includes the striving toward a fuller and deeper participation and involvement in one's own spontaneous and genuine feelings. To the degree to which we move in this direction, we wish to establish good human relationships, relationships of our own choosing, in which we are capable of giving and receiving love, and of respecting and fighting for our own real interests and the interests of others. Self-realization would include the capacity to develop and hold autonomous convictions and beliefs and to be wholeheartedly devoted to them. A realistic awareness of limitations and possibilities, of factual assets and achievements would constitute the basis for an inner feeling of strength and self-confidence and a stimulus toward self-improvement and self-development. To move in the direction of self-realization means to move in the direction of morality since the concern with moral values is a part of man's nature. Similarly, the fulfillment of his nature would inevitably include the capacity to plan, to exercise choice and decision, to have purposes, to conceive and strive toward individual goals. Being human he is by nature a part of the social unit and his interests are fundamentally in harmony with it. His concern is with its growth and improvement as a natural con-

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dition for his own self-fulfillment.

Dr. Horney's view of the human being is a holistic one in which the human being is viewed as a totality whose relationship to others and to himself are viewed as different aspects of the same living process. In this totality, to the degree to which the individual is healthy, there is natural unity in which no body-mind, individual-society, constructive-destructive dichotomies exist. Harmoniously integrated, the physical, the intellectual, the emotional aspects of his unitary being strive toward a fuller, more creative living in relation to others and to himself.

REAL SELF SOURCE OF GROWTH

The real self, "the palpitating inner life" of the individual, is the source of this growth process, of "the struggle toward self-realization." Self-realization is not a finalistic concept, nor is its goal a static one. It is a dynamic process, an unfolding, a moving and developing which does not and cannot take place in a vacuum, but requires a soil in which factors conducive to such growth are present. In the beginning of a human being's development, he requires a human environment which will provide him with affection, healthy support and guidance, respect for his individual rights, and interest in him as a person. In such an environment he is able and free to develop along the lines of his basic human striving toward self-realization.

When, instead, his human environment approaches him, overtly or covertly, with hostility or indifference, with disinterest, disrespect, or exploitativeness, it becomes necessary for the child to direct his energy toward coping with this menacing world. Instead of growth, his dominant concern becomes a search for safety. The threatened child, feeling basically anxious and insecure, develops compulsive defenses in order to cope with others. These defenses ultimately come to constitute neurotic orientations toward others, away from others, and against others. Inevitably, as he turns from one defense to another, he becomes involved in conflict between these opposing and irreconcilable attitudes. These basic

conflicts in his relations with others threaten his psychic unity and he is driven to adopt measures to escape from them. The search for unity is now added to the search for safety as a compelling motivation in the individual's life.

The neurotic development to this point may be visualized as essentially defensive in character. This stage of defensive development corresponds in general to the chronological period of childhood. It is one in which the individual is primarily concerned with finding ways to cope with others, to relieve his anxiety and to escape from his conflicting orientations toward others. As the human being develops he feels increasingly some of the major consequences of his neurotic development. As a result of the neurotic interference with the natural process of self-realization, he has been unable to develop a sense of his own identity. Each step in the neurotic development has moved him further and further from his real self—from the potential source of identity, meaning, strength, autonomy and health unity. If he is to continue to exist, he requires a solution which will not only help him escape from his inner conflicts, but also give him some basis for existence, some sense of meaning and purpose in life, some feeling of identity and value. In a competitive society such as ours, he requires also some means for coping with his feelings of inadequacy in relations to others, some means for feeling superior, some substitute for the self confidence which he lacks.

What is required in other words is a more comprehensive, in a certain sense a more positive and creative, solution than any the individual has previously adopted.

CAPACITY FOR IMAGINATION

It is at this point that there comes to his service a uniquely human capacity which promises to fulfill all of these needs—the capacity for imagination. In imagination he creates an identity which will fit all of his needs, relieve his inner distress, an identity of absolute flawlessness, a shining image of unlimited omnipotence and omniscience, glorious in all its aspects. In part

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fictional, in part an enormous exaggeration of existing assets, in part a glorification of neurotic defects, this image appears before his eyes as the magical solution to all his problems.

With the appearance of this idealized image, the neurotic individual has embarked on the most crucial search of all—the search for glory. Gradually, the process of self-idealization leads the individual to attempt to identify himself with his idealized image. The solution of self-idealization is an inner process which requires expression and fulfillment in actual living. It is not enough for the individual to imagine that he is his idealized self. He must prove it to himself in action, or at least provide some external semblance of it, and it must be affirmed by others, before he can believe in it. As a result he now turns his energy toward self-actualization, the term which Horney uses to describe all the measures the individual adopts in his attempt to make his idealized self appear to be an existing fact.

Together these twin drives—the drives toward self-idealization and self-actualization—constitute the basic elements in the search for glory which has now become the dominant, and sometimes the all-absorbing, pursuit of the individual's life. This step, actually the most drastic an individual can take, might be expected to be heralded by some convulsive and shattering signal. Instead it occurs quietly and imperceptibly. The individual is quite unconscious of the fact that his life has taken this crucial turn, that he has now abandoned his real self and turned his face toward an illusion. Nor is this surprising. In his attempts to cope with his basic anxiety, his center of gravity has shifted from himself to others. In a sense he has become accustomed to the abandonment of his real self and it is for this reason that the inner shift of his center of gravity from his real to his idealized self can take place so quietly. What further facilitates this move is the presence in our culture of many factors which make being a real person something strange and even something undesirable.

Self-actualization may focus on the

achievement of power, prestige, wealth, fame, or excelling in one way or another. It may focus on the achievement of a vindictive triumph over others. It will inevitably come to include efforts to compel the outer world to treat the individual as if he were factually his idealized self. He makes the irrational, but highly rationalized, claim that others fulfill automatically and totally all of his many needs. If he needs to feel omnipotent, the universe itself must shape itself to his purposes. Time and space must contract or expand as it suits his needs. Laws, circumstance, the facts of past and present, of process and development, of structure and function, all must shift and change instantly, as the individual requires. The assertion and fulfillment of these claims is an invariable and important element in the process of self-actualization.

EFFORTS TOWARD PERFECTION

Most crucial of all for the individual's further development is his attempt to actualize his idealized self by molding himself into a state of perfection. He holds up for himself a set of commandments, inner dictates, or shoulds, and demands of himself immediate and complete fulfillment. The particular dictates which are found in the individual depend on the structure of his idealized self. He may demand of himself absolute omniscience and omnipotence, the ultimate in saintliness and understanding, perfect serenity, invulnerability and invincibility, etc. In every case the demand is for the absolute, the ultimate, the God-like, the total, the perfect, the best, the greatest. Nothing short of this perfection will do. The success of the entire search for glory depends on the fulfillment of these shoulds, and the result is the establishment of a harsh and tyrannical inner dictatorship which has far reaching consequences for the individual's life.

The general outlines of the search for glory are now clear. Involved in it are self-idealization through imagination and attempts to actualize the idealized self by the achievement of superiority over others, by compelling life to fulfill irrational claims and, above all, strenuous and unceasing ef-

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forts to transform oneself into a super-human, God-like being. To the degree to which the individual succeeds in these strivings, he achieves the reward of the subjective feeling of pride. It is this feeling of pride, the neurotic's substitute for the self-confidence he lacks, that he comes to treasure above all else. Based as it is on myth, its value to a neurotic is matched by its extreme vulnerability. Should others, or should life, fail to fulfill his irrational claims, should he himself fail to fulfill his shoulds, the result is a crushing blow to this false pride. He must now dedicate his energies to protecting and reinstating this precious affect when it is hurt.

The search for glory has crucial consequences for the individual's further development. As is the case with all neurotic solutions, it introduces new problems which require further attempts at solution. The most important consequence of the search for glory is alienation from the self. Each step in the neurotic development leads the individual further and further from his real self, but the search for glory represents the most active and purposeful abandonment of all that is real in the individual. The real self has become a stranger and, what is worse, a part of the despised reality which must be shunned and destroyed at all costs if the aims of the search are to be achieved.

This movement away from the self must inevitably be accompanied by a hostile, vindictive turning against the self. The shoulds present to the individual a demand for perfection which no human being could possibly achieve. However strenuously he may be dedicated to the labor of molding himself into a god, his efforts are doomed to failure. He cannot erase his human limitations, nor his individual—and neurotic—shortcomings. It is this reality which above all else stands in the way of his attempt to believe his own mythology. Inevitably he comes to hate and despise this reality, to turn destructively against it in an effort to eliminate it. Remorselessly he determines to undermine, to belittle, to frustrate and ultimately to crush his despised self. What results is an inner

state of terror in which the individual is truly "at war with himself."

The development which began with the creation of an idealized image has now reached an advanced point at which one can begin to speak of a pride system in which two entirely opposed drives are the dominant forces—the drive toward self-aggrandizement and the drive toward self-extinction. These opposing drives now threaten the individual with involvement in an intra-psychic conflict of major proportions. It becomes vitally necessary for him to relieve the enormous tension generated by this inner rift in his structure and, above all, to escape from the conflict itself. His attempt at solution may be in the direction of self-effacement. Here he accepts the despised status and attempts to turn his back utterly on all that is expansive and prideful in himself. Or, he may attempt to solve this conflict by moving in the direction of expansiveness, attempting to identify himself completely with his idealized self while utterly rejecting the despised self. Finally, the individual may attempt a solution by abandoning both drives and resigning from active living. These three solutions—self-effacement, expansiveness, and neurotic resignation—constitute the focal point around which his neurotic structure revolves, the main determinants of much of his behavior, his feelings, his aims and goals, his values, his taboos and inhibitions, his fears and his anxieties.

PRIDE SYSTEM VS. REAL SELF

The second intra-psychic conflict which grows out of the solution of self-idealization is potentially the most crucial of all since it involves both the constructive and destructive forces in the personality structure. It is the central inner conflict between the pride system and the real self. To the extent that the real self has remained an alive force in the personality, this conflict will assume greater and greater significance for the individual. Most frequently it is a conflict which appears during analytic therapy when the real self has been liberated and strengthened sufficiently to oppose

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its strivings against the compulsions of the undermined pride system. Until such time, the individual avoids this conflict by attempting to eliminate from awareness any aspects of his real self; in other words, by actively alienating himself from the core of his own humanness.

This brief outline of *Neurosis and Human Growth* only touches on the wealth of theoretical and clinical material it contains, but makes possible a meaningful evaluation of its major contributions.

The single most important of these contributions is the concept of the real self and of the process of healthy self-realization, to which reference has already been made. These concepts are the center of a holistic, dynamic theory of human motivation. They give us a basis for understanding healthy development, without which basis we can neither understand the psychodynamics of the neurotic process nor formulate clearly the goals of psychoanalytic therapy.

In *Neurosis and Human Growth* there is presented a theory of neurosis more comprehensive and valid than any we have seen heretofore. Although the focus of the book is chiefly on the individual's relationship to himself, Dr. Horney makes clear the organic connection between this intrapsychic relationship and the relationship of the individual to others. Not only does a disturbance in one area contribute to disturbances in the other area, but, in a deeper sense, disturbances in relation to others and to oneself are seen as inseparable expressions of one underlying process. This important theoretical and practical point was implicitly made by Dr. Horney in her previous works. It is explicitly stated and elaborated in her present work. Neurosis, then, as well as health, must be seen from a holistic point of view.

ALIENATION FROM SELF

Among the contributions to our understanding of the neurotic process, I consider the deeper insight into the nature and significance of self-estrangement to be most important.

The phenomenon of alienation includes the individual's movement away from him-

self and the progressive weakening of the functions of the real self. It is this process of alienation that is responsible for the ego-weakness described by Freud. It is now clear that the self, far from being the naturally weak and ineffectual "ego" of Freud's description, is the vital center of the human being which becomes weak only in consequence of the neurotic development. What is important here is the fundamental difference in basic philosophy arising out of these two views of the self. If we accept Dr. Horney's view—and those working with her concepts have ample evidence to support it—we see human beings possessed of potentialities for healthy and creative living far beyond the limits set by the pessimistic, essentially belittling, "ego" view. We are able to see that weakness of the self has causes and that these causes can be determined and removed.

Alienation from, and a weakening of the real self help us understand the neurotic individual's enormous sensitivity to anxiety and conflict, his inability to direct his life, to take responsibility for himself, to work in his own real interest, to experience and express his own real feelings with depth and spontaneity.

A recognition of the importance of the concept of alienation also provides a deeper understanding of the self-perpetuating dynamism in neurosis. Unable to accept the biologically false, static concept of the repetition compulsion advanced by genetically oriented analytic theories, modern psychoanalysis strives to answer the question, what is it that perpetuates a neurosis? We are able to state that each step in the neurotic development inevitably leads to further neurotic development. Basic anxiety leads to the adoption of defensive measures. These produce basic conflicts which necessitate further defensive solutions. The most comprehensive of these defenses is the solution of self-idealization which, in turn, produces intra-psychic conflict requiring further solution. What is crucial here, however, is that none of these steps could be taken if the individual were not already to some degree alienated from himself. For instance, no human being can turn de-

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structively against himself unless that self is not already to some extent felt to be a stranger. Similarly, no human being could blot out so completely whole aspects of his personality, live so completely through fragments of himself, or even tolerate such fragmentation, unless he were already alienated from himself. We see, then, that each step in the neurotic development increases the individual's estrangement from his real self and that this estrangement necessitates and makes possible new steps which lead the individual still further from himself.

Dr. Horney's new work adds to our knowledge concerning the perpetuation of neurosis in yet another important way. We know that the neurotic development begins as the result of impaired inter-personal relationships early in childhood, in consequence of which the child develops a feeling of basic insecurity and anxiety. *Neurosis and Human Growth* describes a shift in the neurotic development from the inter-personal to the intra-psychic. An important consequence of this intra-psychic development, chiefly the development of the pride system, is a disturbance in the individual's relationship to other human beings. With individual variations, pride increases the individual's feeling of helplessness and dependency on others. It introduces powerful new sources of hostility toward others, and inevitably makes him see others as hostile, or potentially hostile, threats. In one way or another it isolates him not only from what is human in himself, but also from other human beings. Self contempt, externalized to others, opens up a whole new area of difficulties in inter-personal relationships. In this way, basic anxiety is constantly being fed and reinforced, and the need for neurotic defenses perpetuated and increased.

Dr. Horney's concept of the pride system is a major contribution to our understanding of the driving forces in neurosis. In her previous books, she had described some of the elements in the search for glory and recognized their importance. In *Neurosis and Human Growth*, these compulsive drives are now seen to constitute a unity,

a comprehensive attempt to achieve a glorious identity which promises fulfillment for the person's life. His compulsive ambition, his drives toward excelling, toward power, toward triumph, toward perfection—all are component parts of this over-all search for glory. His search for vindictive triumph and his compulsion to destroy himself are also essential elements in this search. We can now see—as Adler did not—self-glorification as a neurotic solution. Similarly, we can now see self-destructiveness—as Freud did not—as an inevitable consequence of the failure to fulfill "shoulds," and as an active, unconsciously purposeful attempt to achieve glory by eliminating the despised self. Instead of the dubious and mystical Jungian concept of archetypes, we now have a source of valid insight into the figures which appear in men's dreams and fantasies and which represent symbolic expressions of different aspects of the pride system and the real self.

Just as our knowledge of the driving forces in neurosis is broadened and deepened by this new work, so does it give us new insight into the conflicts which threaten the neurotic individual's unity. To the inter-personal conflicts described in *Our Inner Conflicts* must now be added the two major conflicts in the individual's relationship to himself. I believe the concept of the central inner conflict to be of particular interest and importance. While it has a resemblance to the metaphysical concept of the conflict between "good" and "evil," I believe that a much more accurate analogy would be with the conflict in the physical sphere between the infectious organism which enters the body and the body's curative forces which attempt to destroy it.

This new insight into the nature of neurosis permits us to differentiate more clearly between healthy and neurotic strivings. We are able to differentiate healthy from neurotic ambition; healthy self-criticism from neurotic self-disparagement; healthy concern with self-improvement from neurotic self-lashing toward perfection. We are able to differentiate the healthy conscience and healthy morality from the neurotic conscience and pseudo-morality. We are able

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to differentiate genuine self-love from narcissism, genuine love toward others from morbid dependency, healthy self-interest from selfishness. In each case, the basic criterion is the source of the striving. Does it emanate from the real self? Is it an expression of the human being's basic striving to fulfill his humanness? Or is it a part of the neurotic's worship of the false god he created out of inner distress and which now crushes him under its awful tyranny? By differentiating healthy from neurotic strivings, Dr. Horney is, once again, implicitly stating her belief in the fundamental constructiveness of human beings. She is saying that it is possible for human beings to be other than the neurotic human beings here described. While it may be stated that this is self-evident, it is pertinent to point out that there are many schools of thought, both inside and outside psychoanalysis, which hold that there is no love but possessive and selfish love, no self-interest but selfishness, no self-improvement but perfectionism, no conscience but the harsh and rigid neurotic conscience; in effect, no striving but that which Dr. Horney has clearly described as aspects of the neurotic search for glory. This clearer understanding of the neurotic drives and of the nature of healthy strivings emphasizes the qualitative, rather than the quantitative, difference between them.

NEUROSIS AND SUFFERING

Another major contribution which Dr. Horney has made in her present work is her insight into the role of self-idealization in producing human suffering. Consciously or unconsciously, the neurotic individual invariably pays a great price in suffering for his neurotic entanglements. In *Our Inner Conflicts* emphasis was placed on the suffering resulting from conflicts in the individual's relationship to others. In *Neurosis and Human Growth*, we see the enormous suffering resulting from the neurotic's search for glory. He suffers under the terrible strain of attempts to mold himself into his image of perfection in the ever-present fear that he will fail to do so. When he does fail, as inevitably he must,

he suffers under the whip lash of self-hate and self-contempt. When his claims are not fulfilled by others he suffers the deep and bitter anguish of frustration and envy. His vulnerable pride exposes him to inevitable hurt both by others and by himself. His intra-psychic conflicts produce a sometimes unbearable state of tension, anxiety, and panic. Each of the major solutions to intra-psychic conflicts introduce special sources of deprivation, abuse, inhibition and frustration, all added to his suffering.

To all of this real suffering must be added the neurotic *need* to suffer which is particularly strong in self-effacing individuals and chiefly a consequence of the pride system development. Neurotic pride is the single most important source of suffering in neurosis. Underlying this suffering is the quiet but deep and bitter despair which the individual feels, albeit unconsciously, at the inner knowledge that he has abandoned his real self, that all of his frantic efforts are dedicated to the strengthening and worship of a god who is not only a false god but is actually the individual's bitterest enemy. That this inner knowledge is present can be demonstrated by numerous examples of dreams in which the individual expresses this despair at his self-estrangement and self-extinction long before he has any conscious awareness of it.

Dr. Horney's new work on the pride system also helps us understand a great deal more about how the neurotic individual makes others suffer. The specific ways in which he does this vary from person to person, but in all cases they stem from the neurotic's need to use others as steps on the ladder to glory. His compulsive ambition, his needs to excel and triumph make him ruthlessly competitive and exploitative. His egocentric claims permit no consideration for the feelings and needs of other persons. His perfectionism, externalized to others, make him a ruthless taskmaster to those about him. Similarly, the externalization of his self-hate and his self-destructiveness produces enormous hostility toward other human beings and toward life itself.

The vindictive reaction to hurt pride is

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another source of the neurotic's need to inflict pain on others. The self-effacing type's parasitism and abused feelings, the arrogant-vindictive type's brutality, the resigned type's coldness—all these in different ways inflict suffering on others, as well as on the individual himself. These are not expressions of an innate aggressive instinct, just as self-destructiveness is not an expression of an innate death instinct. Both are consequences of the neurotic development, and particularly of that aspect of the neurotic structure which Dr. Horney has called the pride system. More than any other single factor in neurosis, false pride, the enemy of all spontaneous feelings, interferes with the natural striving to love others and oneself, to accept others as they are, to respect their individual needs and interests. It is neurotic pride which makes it not only difficult but undesirable for the human being to relate himself to others in terms of his basic human striving toward self-realization.

Of particular interest to analytically oriented psychiatrists and workers in related fields is the beginning, in *Neurosis and Human Growth*, of a psychiatric typology based on dynamic principles. The formulation of the three major solutions to intra-psychic conflict—self-effacement, expansiveness, and neurotic resignation, each with its sub-types—is the beginning of such a typology. In the same context, this new work on the pride system provides us with new tools for understanding the classical psychiatric entities. The crucial significance of alienation in schizophrenia, the importance of self-glorification in manic states and of self-contempt in depressed states, the rebellion against hypermoral "shoulds" in psychopathy, are examples of this.

Dr. Horney's exposition of the dominant role of the search for glory in the neuroses of our time and our culture provides important clues to an understanding of the political phenomenon of totalitarianism. The compulsive drives toward mastery, power and vindictive triumph are essential elements of dictators' motivations. Just as the neurotic attempts to relieve his inner distress by erecting a god to whom he then

submits, so do whole peoples, under conditions of national distress, turn to the Hero, the Leader, to whom they sacrifice their freedom, will, dignity and rights as human beings in return for the promise of glory. The problem is, of course, far more complex than this. Historical, economic, and sociological factors are essential, but I believe that the individual psychological element is of at least equal importance, and it is this element on which Dr. Horney's new work sheds a brighter light. The new insight into the process of self-realization provides us with a valid criterion for social criticism and social striving. A society would be constructive to the degree that it provided a soil for the self-realization of its individual members. A society would be destructive to the degree that it ignored, impeded or actively rejected the importance of the individual and his basic human striving to fulfill himself. It is my contention that according to this criterion, the democratic social and political structure provides the best soil for individual self-realization and that a part of this striving in healthy individuals would be directed toward removing those growth-inhibiting factors which do exist in our society.

CONTRIBUTIONS TO THERAPY

Finally, *Neurosis and Human Growth* constitutes a major contribution to the field of psychoanalytic therapy. We know now that the pathology of the individual's relationship to himself is as crucial as the pathology of his relationships to others; that, indeed, they are inseparable from each other. We know that the central disturbance in neurosis is alienation from the self and that the single factor which is chiefly responsible for it is the solution of self-glorification and the whole development which follows from it. A deeper understanding of neurotic pride—its genesis, its functions, its consequences and the intra-psychic conflicts which it brings into being—leads us to recognize that it is an area on which analytic therapy must focus. It is this entire system which must be undermined in the course of therapy.

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At the same time, this new knowledge helps us to understand a great deal more about the difficulties of analytic therapy. It is the pride system itself which is the greatest source of this difficulty, producing as it does the most serious obstacles to the individual's efforts to become more aware of himself and to change. As these new insights help us to become more aware of the amount, the nature and the difficulties of analytic work, they also help us to become more aware of the powerful ally we have in therapy. This ally is the real self, the alive force within the human being which yearns for liberation and the opportunity to resume its growth. Therapy, then, as it attempts to undermine the forces of the pride system, attempts also to help the individual find his real self, to become aware of the human being he actually is, and of the truly wonderful potentialities he has for freedom and development as a real person.

Dr. Horney's theory, as it has been carried forward in *Neurosis and Human Growth*, is a living and optimistic one. As it sheds light on aspects of the psychic life which were previously darkened, it opens up new avenues of thought and inquiry. We know now that it is possible for human beings to change and to become more truly human. We know that they are not by nature destructive and anxiety ridden. We know that they are capable of outgrowing neurosis and that this involves far more than adjustment, relief of symptoms, or the achievement of more satisfactory repressions. We know that human beings are not by nature the mute and songless creatures which neurosis makes of us. We know now that the enemy each of us faces is not an innate part of our nature, not something we are doomed to suffer under throughout our lives. It is an enemy which we create out of inner necessity and can be given up to the degree that these inner necessities no longer exist. Human beings need no more be slaves to inner dictatorship than they need to be slaves to outer dictatorship. They can be truly free to live their lives with dignity, with self-respect, with hope, with joy, with love, for themselves

and for others. This is essentially the contribution which Dr. Horney makes in her new book.—ISIDORE PORTNOY, M.D.

PSYCHOANALYSIS AND RELIGION. By Erich Fromm, Ph.D. 119 pp. Yale University Press. \$2.50.

IN THIS BOOK Erich Fromm continues the logical sequence of the ideas he has already expressed in his two previous books, *Escape from Freedom* and *Man for Himself*. The book is based on a series of lectures given at Yale University under the auspices of the Terry Foundation. This was a fund established to encourage lectures on religion studied from the viewpoint of science and philosophy. It is of some historical interest that C. G. Jung's *Psychology and Religion* was also published in 1938 through the Terry Foundation lectures.

Fromm starts by defining the problem. Man has come very far from the days when he was a weak, helpless, ignorant pawn at the mercy of a frequently unpredictable Nature. Our scientific discoveries and technical achievements have brought us to the point where we can produce more than enough for our needs and where we can control our environment to an amazing extent. However, Fromm asks, have we come closer to the realization of the perfection of man, that which has to do with loving his neighbor, doing justice and speaking truth?

The answer is obvious. Instead of brotherliness, happiness and contentment, there is spiritual chaos in which contact with inner reality is lost. This problem has been expressed by Horney in terms of alienation from the real self. Fromm shows the tremendous confusion and inconsistency in the values held by individuals in our culture. He sees a wide gap between the ideals professed by our culture, the principles taught in the churches and the actual practices of every day living. Humans look for meaning in life, and cannot find it in the contradictions, dishonesties and cynical resignation so much in evidence. It must be

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associated with truth, justice, love and the capacity for sincere devotion.

People are tormented by uneasiness, anxiety and confusion. Some turn to traditional religion to escape intolerable doubt. The author protests that at present priests and ministers are the only professional groups concerned with the soul and notes that this was not always so. Philosophers and psychologists were also at one time concerned with it. He criticizes psychology for becoming a science lacking its main subject matter, the soul. For him, the soul has to do with love, reason, conscience, values. He shows how Freud found he had to study the soul of man. He demonstrates that psychoanalysis makes possible the most minute and intimate study of the soul. The analyst is thus a physician of the soul. The question is posed: what is the relationship between priests and psychoanalysts?

Fromm describes both Freud's and Jung's position in regard to religion. Freud dealt with this problem in *The Future of an Illusion*, stating that religion had its origin in man's helplessness in confronting the forces of nature outside, and the instinctive forces within, himself. What Freud calls the illusion is the process whereby man, surrounded by dangers and feeling insecure, relies on a being of superior strength and wisdom to protect him. This is a repetition of the childhood neurosis where the child seeks security by relying on, admiring and yet fearing his father. Freud says man must free himself from authority that threatens and protects. He declares that the feeling of powerlessness is not religious feeling. On the other hand, Jung says religion is an experience of being seized by a power outside one's self—that is, surrender to a higher power.

Fromm discusses different types of religious experience. He points out that there have been religions without God, such as Buddhism, Taoism and Confucianism. He defines religion as any system of thought and action, shared by a group, which gives the individual a frame of orientation and an object of devotion, and feels that in every culture man has had a need for this. Freud interpreted religion as a childhood neurosis

of man, but felt that neurosis may also be considered a regression to primitive forms of religion. Fromm states that in our culture monotheistic religion and the ethical philosophies are a thin veneer covering the more primitive, essentially idolatrous religions of modern man, such as worship of power, success, prestige, "the authority of the market," and also a modern version of ancestor worship. He points out that traditional religion also usually compromised with and has been influenced by secular power, with the result that the churches have not always been the representatives of the spirit of the Ten Commandments or of the Golden Rule.

The author divides religion into two categories: authoritarian and humanistic. Essentially, authoritarian religion is surrender to a power transcending man. Man gains grace, protection and salvation by complete surrender to a higher authority. Man must despise everything within himself and feel the humility of a mind overwhelmed by its own poverty.

In humanistic religion man must develop his own strength and his own powers. The goal is self-realization, an awareness of truth, love, and a relatedness to the world, to people and to nature. Some illustrations of humanistic religions are early Buddhism, Taoism, and the teachings of Isaiah, Jesus, Socrates and Spinoza. For the author, man's great defect and source of unhappiness is his alienation from himself. Here, Erich Fromm takes a view similar to that of Horney concerning the problems of man. The psychoanalyst wants to understand the human reality behind the thought systems of religion. The human reality underlying the teachings of Buddha, Isaiah, Christ, Socrates or Spinoza is determined by a striving for love, truth and justice.

Calvin's theology differed from this, teaching predestination, the doctrine that God has already decided before a man is born whether he is to be saved or sentenced to eternal damnation. The human reality behind Calvin's theological system and that of authoritarian systems is submission to power, with no real concept of love or respect for the individual.

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Fromm argues that mere adjustment to environment cannot be the aim of psychoanalysis. Analysis must concern itself with cure of the soul. In humanistic religions and in psychoanalysis, man's ability to search for truth is a measure of his movement toward freedom and independence. According to Fromm, analytic therapy is essentially an attempt to help the patient gain or regain his capacity for love. The concepts of sin and guilt reflect the differences between humanistic and authoritarian religions. In the authoritarian atmosphere, the reaction to sin is guilt, fear, feeling powerless and throwing oneself completely on the mercy of the authority, hoping to be forgiven. Under a humanistic regime, whether internal or external, man's tendency to err is looked upon with understanding and love. Thus, instead of feeling self-hate, one is inspired to change and do better. Fromm mentions the soul-searching that must go on in any psychoanalytic experience. He mentions as elements in religious experience the concern with the meaning of life and with the self-realization of man, the feeling of relatedness to other men, to life and to the universe. These resemble the goals of psychoanalytic therapy which Horney has presented. Fromm asks whether psychoanalysis is a threat to religion, then gives his own answer to this question:

"The greatest threat to religion consists of the false and distorted values man has adopted. Psychoanalysis would be a threat only to the authoritarian, idolatrous aspects of religion."

This is a book for those who are concerned with a most important aspect of psychoanalysis—the spiritual. Fromm's descriptions of humanistic religion resemble the spiritual and moral growth which goes on in every successful analysis. It is very closely identified with Horney's concepts of growth and self-realization. Although these words appear in Fromm's book, they are not defined and correlated with a unified system of human motivation. Because of this, one is left with the impression that Fromm's handling of psychoanalysis is too general and not clearly specific. His descrip-

tions of humanistic values are excellent. The theme is developed in a logical, coherent manner, and the book, in general, represents a valuable contribution to a better understanding of the relationships between psychoanalysis and religion.

—BENJAMIN J. BECKER, M.D.

PRINCIPLES OF INTENSIVE PSYCHOTHERAPY.

By Frieda Fromm-Reichmann, M.D. 245 pp. Chicago University Press. \$3.75.

DR. FROMM-REICHMANN states: "The goal of intensive psychotherapy is understood to be: alleviation of patients' emotional difficulties in living and elimination of the symptomatology, this goal to be reached by gaining insight into and understanding of the unconscious roots of patients' problems, the genetics and dynamics, on the part of both patient and psychiatrist, whereby such understanding and insight may frequently promote changes in the dynamic structure of the patients' personality."

To all of this we would agree with one general addition which we feel necessary for the sake of completeness. Nowhere in her goal appears the question of the constructive. It is more or less implied as something of central importance but nowhere is it given explicit expression as the one essential for overcoming the neurotic process. The reclaiming of the self could not occur without the growth of various forces which went astray at an early period in life and are continuing to go astray in the present. This is a truly dynamic concept.

Dr. Fromm-Reichmann writes of curative insights obtained after the "patterning influence" of a repressed or dissociated childhood experience has been worked through. This will lead them to a "valuable frame of reference for the patients' insight into the functioning of their inner minds as well as for their correct orientation in and adequate adjustment to the world outside themselves." There is no mention of the fact that, during this process various constructive assets are being discovered and fortified. It is on the strength of these that

the patient moves forward. The huge jump made from the present to the childhood past cannot encompass the vicissitudes the neurotic forces have undergone in their attempt to meet, by their diverging and incompatible ways, the demands for survival.

What Dr. Fromm-Reichmann overtly does to fill in this gap is to appeal to the patients' reasoning. For example, a patient she cites who was frightened of his repressed impulses toward hostility and destructiveness was relieved of his excessive need to placate and propitiate all people when he saw that he had an envy and hatred of his brother coupled with a childish belief in omnipotence, so that he then became his brother's undoing. The brother lost a leg in war. When the patient saw the difference between "thought" hostility and "acted" hostility, he was relieved. The author believes that this same envy and hatred are simply repeated in various life situations.

This is not a dynamic formulation for it does not account for the enormous content of energy in this hostile trend. In order for any living process to exist and to grow, it must be supplied constantly and renewed. Otherwise it will die. The reason compulsive hostility is kept alive in us is simply because it has a job to do, and the energy to do this job is supplied by the stringent necessity of maintaining some semblance of unity.

This brings us to another criticism of Dr. Fromm-Reichmann's understanding of the neurotic process. There is no indication of the awareness of unconscious intra-psychic conflict as the prime mover of the neurotic development. This is not to say she is not aware of the importance of anxiety. She refers to the "dynamic bipolarity of the symptomatology of mental patients." But this is a gross underestimation of the directive powers of a conflict which can undergo no resolution. There are further complications such as the fact that this inner hopeless struggle can go on without the patient's awareness to such an extent, and with so thorough an organizing element, as to eventuate in the formation of what Dr.

Karen Horney has gathered into her concept of the idealized image. This is a purely intra-psychic organization which may eventually acquire an autonomy sufficiently complete to pass for the person himself. This is a counterfeit. So we see that because of her essentially static conception, she cannot fully evaluate the self-perpetuating life of the anxiety producing conflict. It becomes a mere matter of repetition. Then, because of her excessive emphasis on the inter-personal aspect of the human situation, she fails to grasp the more basic principle—the idealized image. This synthesis is a product of intra-psychic attempts at maintaining the necessary cohesion for survival on the one hand, and the equally essential fragmentation on the other. The latter process serves to keep hopeless conflicts in a state of frozen immobility. Here is the full time job the neurotic has, and this is what is set into motion whenever any single part is threatened. It is for this reason that each little disturbance can have a devastating effect. The devastation is the product of the whole machine set into motion.

Dr. Fromm-Reichmann makes no mention of the process we call "alienation." The patient is a stranger to his own integrating self. The psychotic is almost hopelessly bereft of the barest shred of this human essential. For this reason the initial period of entry must be handled with extreme care and acute attentiveness to all signs of anxiety, to all avenues of safety.

This consideration brings in certain very pertinent questions. In view of these serious omissions which the author manifests with respect to theoretical coherence, how does she achieve the results she apparently does? Here we feel quite puzzled. One or two hypotheses present themselves in addition to those offered by the author herself. To what does the author address herself in the patient? What is the nature of the result obtained? Dr. Fromm-Reichmann calls it a two-sided motivation. One is to the interpersonal difficulty. Two, the patient's attempt to alleviate it.

Now, if our hypothesis has any validity, it would appear, from the explicit stand the author has taken, that the approach

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would not be of sufficient incisiveness and meaningfulness to the patient involved. To restate it, an appeal to the inter-personal difficulty or to the desire to alleviate it would not be enough, either to allay the patients' anxieties or to keep them from being constantly generated. Therefore, there would seem to be other appeals which the author makes continuously and without benefit of explicit formulations. To elaborate, it is this writer's belief that no analyst can coexist with a neurotic, let alone a psychotic, without paying some kind of attention to the machinations of the idealized image. And Dr. Fromm-Reichmann appeals to it all the time. Unwittingly she is a master of the art. An art it is, for her response to the patient's image is on an exquisitely intuitive level. She lives with it, deals with it, affirms it and scolds it or neglects it.

On page 123 she writes, "the psychiatrist should immediately try to discourage all acting-out processes in the neurotic." (As if that in itself would be sufficient to obtain a meaningful result). In another place she writes of giving "the patient a special sign of attention by seeing her (the patient) spontaneously for a non-scheduled, special interview." In another she says, "Whenever the patient's comments on his relationship with the doctor are clearly a resistive maneuver, they should be discouraged by the doctor" or even by expressing boredom or doubt!

Apart from wondering why all of this material is not fit for further analytic investigation, the question arises concerning her addressing herself to the patient's idealized image. With some she indulges the image by special considerations, thereby broadening its safety base; in others she subtly plays upon it, molding it now one way, now another, by neglect, discouragement, etc. Is it too much to wonder, then, if in certain respects her therapeutic efforts do not amount to more than a way for permitting the patient—that is, his idealized image—the comfort it had lost, the "freedom" to operate "harmoniously" within its old confines?

It is this writer's belief that the psy-

chotic's breakdown represents largely an internal and catastrophic disarrangement of the idealized image. Unless this happens, or is in the process of so doing, many psychotics can maintain a contact adequate enough to meet the usual "social requirements." It is only on failing these that they would be deemed sick—that is, in terms of "normalcy." These people might be called successful psychotics.

These concepts are meaningful only because of the concept of the real self which Dr. Fromm-Reichmann has not recognized in her understanding of neurosis. To restate our position and to contrast it with the author's, we believe that, by and large, the author helps to make possible a *social recovery* in her patients by making the neurotic more successful in harmonizing the discordant aspects of his image. This is done by various processes. At certain times she induces the repression of one side of the conflict with which the patient is unable to cope. In this manner she streamlines the image, thereby making it possible for it to become smoothly operative once more. In other instances she is instrumental in inducing and aiding the process of externalization so as to decommission the anxiety by separating the conflict. Thereby she extends its various aspects to the patient's environment, whether this be his parents, his employer or the culture.

The important fact is that the results of the therapy are of a highly limited sort. So much so that they have compelled the author to be satisfied with results which in no guise approach the goal of moving toward fulfillment of the real self. On page 33, the author considers as successfully treated a catatonic who was able to live outside the hospital in "her own country home, stable, independent and enjoying her household duties, her artistic accomplishments, and her friendly, casual, personal relationships and social activities. However, she did not fulfill the conventional criterion of a healthy adjustment for which this culture asks, namely, marriage."

But on page 202, she writes, "the psychiatrist should not lose track of the fact that pregnancy remains the great and significant

experience of natural productivity." This would imply that had the girl married, all criteria for a completely successful outcome would have been obtained. We would regard marriage, if it had occurred in this context, as another evidence of a smoother image, unless we had evidence that the marriage was more than a mere conventional adherence or a solution for neurotic anxiety. In this woman's case it is evident that she was having to restrict herself to a limited way of life, a highly isolated one, but one which would allow her considerable freedom from anxiety producing conflict by reason of this very isolation. This is entirely in keeping with the author's basic philosophy that the job of the therapist is to "guide his patients successfully toward finding out about the degree of cultural adjustment which is adequate to their personal needs." Therefore, if the required "cultural adjustment" is reduced, the conflicted and limiting idealized image can then operate in a successful manner and this then will pass for adequate recovery.

From the social viewpoint this kind of "self" could be considered highly desirable, for it can produce the technical efficiency modern America prizes or be in keeping with "cultural norms." From our viewpoint, this type of "productive character" could not withstand the therapeutic test as a desirable example of maturity.

While Dr. Fromm-Reichmann speaks of a dynamic approach to the patient's dilemma, she believes that anxiety is due to a lack of security. "Where there is anxiety, there is fear of anxiety in others." These are tautological positions. From the dynamic viewpoint we postulate the coexistence and independent operation of unconscious conflicts which cause anxiety with which the patient copes usually by neurotic solutions. Security is the result of real growth and bears no relationship to unconscious anxiety *per se*, since neurotic anxiety is determined strictly by the operation of unconscious conflict. These must be conveyed to awareness and then to integration with the whole before the growth retarding effect can be dissipated. From the standpoint of dynamics Dr. Fromm-Reich-

mann further believes in the repetition of childhood traumata as explaining the persistence of anxiety. This is not a dynamic position since it does not admit the fact that a neurosis represents a process which propagates itself constantly and so can never be the same from life span to life span. Dr. Fromm-Reichmann has some appreciation of this fact, inferentially, when she insists on the therapist's alertness to "the fact of the actual experiences between therapist and patient *then and there*." But this is sterilized when she sees it only as a recurrence of "similar warping and thwarting experience with a significant adult in his early life." This doctrine can attain fabulous proportions when she attributes, for example, an analyst's "special sensitivity to the patient's meaningless chatter" to the fact that the "doctor as a child had had to listen to the endless inconsequential talk of an elderly grandmother!" It is clear that this kind of explanation on the basis of mere association is not dynamic psychiatry as we define it today. We might wonder, in the case of this analyst, about his neurotic needs to derive meanings immediately out of the chaos the patient was presenting. In short, what is the amount of residual omnipotence, of coercion feelings, etc. in the doctor?

In keeping with static conceptions the author tends to biologize psychic phenomena. "Pregnancy remains the great and significant experience of natural productivity" regardless of her (the patient's) rejection of motherhood. This is a characteristic we share with all living things and one not worthy of note from the human standpoint. But she is caught in this kind of thinking when she believes that depressions can be explained on the basis of women losing babies by abortion or not having them at all! She does not distinguish, for instance, between the expendable depression of the healthy disappointed human being and the unrequitable depression of the one who is caught in insoluble intra-psychic conflict. This will necessarily be the case if she is not clear about the functions of the idealized image and the life of the healthily integrating real self.

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In spite of the theoretical shortcomings in Dr. Frieda Fromm-Reichmann's approach to the vast problem of neurosis and psychosis, we have read her book with a quiet and satisfying interest. This appeal is not principally to one's intellectual faculties; rather it is a human appeal to the feeling aspects of one's being. One is continuously aware that here is a truly human being at work, human in the sense of exquisite awareness, on a profoundly intuitive level, of the workings of the human totality. And not a small part of it is her deep desire to reach out to her fellow-man, now her patient, by all the ways made available by an unstinting love for him. Because of this she can go where those of us, perhaps better armed theoretically, cannot dare to go. Because of this she can bridge the vast divide that separates us from the psychotic, for in her sensitiveness to all the sufferings of the human being she can live for the time being in his private world, thereby gaining access to the process of recalling the patient to his lost domain.

—LOUIS E. DEROSIS, M.D.

PSYCHOANALYSIS: EVOLUTION AND DEVELOPMENT. By Clara Thompson, M.D. With the collaboration of Patrick Mullahy. Hermitage House. \$3.

THIS BOOK grew out of a series of lectures given for the past several years at the Washington School of Psychiatry in Washington, D. C., and the William Alanson White Institute in New York. In its full context, it is an historical survey and exposition of both theory and therapy, as developed by the psychoanalytical schools of Freud, Jung, Ferenczi, Adler, Meyer, White, Reich, Horney, Fromm, Sullivan and others. Included in the contents of this book are the following chapters:

1. Evaluation of Freud's Biological Orientation
2. Unconscious Processes and Repressions
3. Resistance and Transference
4. Theories about Anxiety
5. Therapy in Psychoanalysis

"It has been the aim of this book," Dr. Thompson states, "to trace the course of psychoanalytic development, to point out the paths which have led in the direction of progress and to criticize as impartially as possible the theories and experiments which have been unfruitful." In recent years new trends and developments in psychoanalysis have emerged. As is usual in scientific progress, the new ideas are not accepted by all workers. With this in mind, Dr. Thompson contends that there is a conservative force tending to resist change and a progressive force pushing forward with impatience.

"Splits have occurred and each group tends to isolate itself from others," she writes. "The serious student seeking orientation in the field finds himself in a state of confusion. On the one hand, deviant groups have perhaps tended to exaggerate the differences, to imply that Freud is completely outmoded and that theirs is the only true orientation. The truth seems to lie somewhere in between. The problem is to obtain some objectivity in evaluating the picture." Although Doctor Thompson starts out with the intention of trying to be objective, one finds that she leans decidedly toward the theories of Fromm and Sullivan.

The book begins with a clear, concise and organized presentation of Freudian theories, from his earliest to his most recent writings. Regarding her own views concerning Freud's theory of instincts she states, "I do not, of course, deny the existence of basic biological drives. The question is rather whether they constitute problems by the very intensity of their energy. The tendency to grow, develop and reproduce seems to be a part of the human organism. When these drives are obstructed by neurotic parents or as a result of a destructive cultural pattern, then the individual develops resentment and hostility either consciously or unconsciously or both. In short, far from being a product of the death instinct, it is an expression of the organism's attempt to live." Though this is certainly more optimistic than Freud's views, it still appears to be influenced by

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the rigidity of mechanistic-evolutionistic thinking.

The two most stimulating chapters of the book are those dealing with "Resistance and Transference," and with "Theories of Anxiety."

Regarding the concept of transference, Thompson gives the following historical data. From 1910 on, the concept of transference was gradually expanding, although little was written on the subject specifically. About 1920, with Freud's formulation of the repetition compulsion, transference again came under scrutiny. Freud began to feel that transference was an outstanding example of the repetition compulsion. The idea of an automatic tendency to repeat earlier life experiences, unpleasant as well as pleasant, gave the concept room for expansion. At about the same time there were again signs of discontent with the existing status of analysis. This time the discontent arose around the lack of therapeutic success, and the belief grew that there was a need for a more vital analytic relationship. It was thought that the procedure had become too intellectual, and that a more emotional re-living of his past problems by the patient in his analysis would remedy the difficulty.

By 1927, when Reich had formulated the idea that defensive character trends constituted the chief resistance in analysis, these trends were unobtrusively included under transference phenomena. He took a bold step when he showed that character patterns could be used as forms of resistance in analysis, but he still clung to a libido formation of them. By his discovery of an active method for interpreting these to the patient, Reich made an effective modification of psychoanalytic technique.

By 1929, Dr. Thompson continues, Sullivan had begun to formulate his theory of inter-personal relationships. According to Thompson, Sullivan's elaboration of the concept of paratoxic distortion is probably the most comprehensive statement of the idea of transference today. Besides Sullivan, others of the cultural school have made significant contributions to the theory of transference. Fromm, in his comparison

of rational attitudes toward authority and irrational ones, has demonstrated an important aspect of transference.

Horney, according to Thompson, "thinks of the analytic situation itself as producing a special reaction. She sees it as a situation in which there is a struggle for power. This she believes is an essentially new situation in the present, and is a reaction to the overwhelming threat to the neurotic defenses. If we take the example of a female patient in love with a male analyst, Freud would see this as a repetition of Oedipus situation. Sullivan would see this as a way of reacting to a male in authority, which has a definite history from the past and a present function in relation to the particular male (the analyst)."

Horney, according to Thompson, would stress almost exclusively the relevance in the power struggle. It might be a device to disgrace the analyst, make herself feel his equal, win a scalp, establish a secure position with the analyst without having to change, etc. In short, Horney sees the transference chiefly in terms of how it is utilized for secondary gain. This makes the inter-personal situation between analyst and patient essentially a hostile one. The patient envies the analyst's position and resents his position of superiority. So each one tries according to his character pattern to destroy the analyst's power. She does not deny that the patient may have tried similar ways of reacting in other situations, but there seems to be a tendency to minimize the importance of discussing these, especially if they were much earlier or in childhood.

Dr. Thompson's review of Horney's theoretical position concerning transference is not a true picture. In *New Ways in Psychoanalysis*, Horney states, "In a condensed formulation, my viewpoint concerning the phenomenon is this: neuroses are ultimately the expression of disturbances in human relationships and existing disturbances are bound to appear here as they appear elsewhere. The particular conditions under which an analysis is conducted render it possible to study these disturbances here more accurately than elsewhere and to con-

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vince the patient of their existence and of the role they play. If the concept of transference is thus disentangled from the theoretical bias of the repetition compulsion, it will in time yield the results which it is intrinsically capable of producing."

Aside from the basic premises on anxiety developed by Freud, Thompson contends that Fromm, Horney and Sullivan have made the greatest contributions to anxiety theory in recent years. Since there has been much exchange of opinion and free discussion among these three, Thompson justly contends that each one's contribution is, in a way, the result of joint research, and she feels that the various points of view do not contradict, but rather supplement each other.

All three disagree with Freud as to the nature of the threat from within which produces anxiety; that is, all three are of the opinion that the threat from within is produced by cultural pressures. Of the three, Sullivan sees the need for approval from the significant adult or adults as the essential atmosphere for the growth of the young human organism.

Fromm's view, which does not disagree with Sullivan's, according to Thompson, expresses it differently. He sees the early pattern of anxiety as growing out of the conflict between the need for closeness and approval, and the need for independence. She feels that the pattern for the development of basic anxiety described by Fromm and Sullivan has something in common with Freud's theory, in that all agree that impulses within the child threaten his relations with others to the extent that he may lose love, be punished or be ostracized.

Horney's views on basic anxiety, Thompson says, "are not as extensively elaborated as Sullivan's and Fromm's. She stresses the frustrating situation which tends to make the child hostile, this in turn leading him to feel that the world is hostile, and this belief leading to an increase in his sense of helplessness."

Thompson later contradicts herself regarding the origin of basic anxiety when she says, "all analysts, including Freud, agree that repressed hostility is a frequent

source of anxiety. Freud sees this as the result of biological forces, a part of the death instinct directed against others. The more recent cultural approach sees repressed hostility as a reaction to frustration or hostility from others. The assumption is that we are born with a tendency to develop and grow. If in the process of growth we meet with disapproval and our inter-personal security is threatened, the rage at frustration has to be repressed because rage also is not tolerated, and the seeds of a dangerous hostility begin to develop. This growing repressed hostility makes us more likely to arouse counter-hostility in others, and this in turn steps up our own hostility, and so on. This dynamic interaction, and not an innate instinct, constitutes the dangerous anxiety producing force from within."

Later at the end of this chapter, she concludes by further agreeing with Horney. "Anxiety" she says, "is always characterized by a feeling of helplessness, a disjunctive force. This is due to the fact that the danger is within, and its nature is not known since the original threat was dealt with by repression or projection, and further the anxiety often arises out of conflict of defense systems, which cannot be resolved by simple means."

The third part of the book, dealing with Adler, Jung, Rank, Ferenczi, Reich, Horney, Fromm and Sullivan, is a facsimile of the book by her collaborator, Patrick Mullahy, *Oedipus Myth and Complex*. She gives little space to the theories of Horney and tends to oversimplify and underestimate their importance in current psychoanalysis. Horney's newer theories dealing with the intra-psychic phenomenon of the real self, self-idealization and whole paramount issue of self-realization are lacking. This portion of the book is impoverished by the omission of relevant facts, or possibly Dr. Thompson's unfamiliarity with Horney's new concepts.

The last portion of the book, dealing with therapy, again is an historical account of factual material, but contributes little to the question of goals in therapy. She says of cure today: "in addition to relief

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from neurotic suffering a person is considered cured when he is capable of relating to other people with a minimum of paratoxic distortions in his behavior and when he is free to develop his powers as far as his education and life circumstances permit." Thompson speaks of goals in therapy, while we speak of growth and goals in therapy. The specific goals in therapy according to Horney are much more extensive in nature and concern all that is involved in self-realization. Growth as a process thus

is concurrent with analysis, and occurs in ratio to the individual's healthy character development. As the individual frees himself more and more from his neurotic entanglements, the constructive forces become available for healthy growth.

As Horney states in *New Ways in Psychoanalysis*, "the aim is not to render life devoid of risks and conflict, but to enable an individual eventually to solve his problem himself."

—DOMINICK A. BARBARA, M.D.

SCIENTIFIC MEETINGS

Regular Meetings at the New York Academy of Medicine

THE SIGNIFICANCE OF FANTASIES IN THE PSYCHOANALYTIC PROCESS. (*Paul Lusshimer; September 27, 1950*) There are two main types of fantasies: the daydreaming fantasies which are substitutes for wishes that cannot be fulfilled or an escape from the unpleasantness of reality, and the constructive, anticipatory fantasies which are substitutes for an actual preparation for action. In classifying fantasies within the thinking processes, they are assigned a position between aware, conscious thinking and the unconscious thinking, as it prevails in our dreams. Freud, in the twenty-third of his Introductory Lectures, described the fantasies as "standing between the world of material reality and the dream world and having psychic reality."

Fantasies should be considered as a means of diminishing the individual's cravings and of bringing his wishes closer to fulfillment. Since such cravings and wishes exist in normal as well as in neurotic persons, fantasies are found in both. The gauge with which to measure normality or neurosis is the degree to which the goal of a fantasy seems to be obtainable. This should not be measured in absolute abstract terms but with due respect for the existing values and potentialities of the individual in his environment.

The question whether the analyst should ask the patient for the presentation of all his fantasies during the analytic sessions can be answered in the affirmative, but good judgment has to be used as to when and how to bring up a discussion of fantasies. Especially in patients who do not

have enough dream material to work on, the encouragement to present fantasy material proves to be a valuable time and energy saving device. In order to make it easier for the patient to talk about his fantasies without fear of guilt feelings, the therapist can point out that most people have fantasies before they fall asleep. These presomnial fantasies are extremely valuable in analytic work and, in most instances, the patient will present some of this fantasy material when he is still reluctant to talk about his dreams. If a patient refuses to talk about his presomnial fantasies or insists that he never has any, then it may be concluded that there is a very strong blockage or a far-reaching alienation from self.

No matter what kind of fantasies an individual has, one will always discover anxiety—often deeply hidden—as a cause of the appearance of a fantasy. In constructive anticipatory fantasies it is anxiety which creates doubts and hesitation and causes a retardation of action after planning. Daydreaming fantasies serve as a refuge from anxiety. The persistence of certain fantasies during analysis is usually an indication of the unmitigated anxiety caused by the prospect of having to look more closely at the self.

It is usually a prognostically favorable sign if the patient reports that his need for fantasies is diminishing. The thoughts of the patient are sufficiently absorbed by constructive planning and the previously existing anxiety has begun to subside. But in some cases the lessening of the frequency of fantasies does not mean a progress toward recovery. When the anxiety increases, the faculty to concentrate on fantasies is di-

minished or abolished. The farther an individual moves away from reality, the less he has the capacity of using the will to direct his thinking. Although he may still be able to control his material thinking, his fantasy life will change from one which he can evoke and direct at will into one which is out of his control and takes on shapes of illusions and delusions.

What has been said about the study of dream series by authors such as Jung, Stekel, *et al*, holds true as well for fantasies. The significance of the single fantasy becomes more evident if we have an opportunity to study a series of even seemingly unconnected fantasies. There we can observe changes, such as the general tendency of the patient to come closer to himself, to admit neurotic trends and to face reality. Progress as well as blockages during the analysis are frequently revealed in the changing character of fantasies. This is of greatest diagnostic significance because it may show personality changes which are not obvious in any other manifestation.

In order to have the full advantage from the study of fantasies, careful observation of fantasy material presented all through the analysis is essential. Special attention must be paid to the question whether the fantasies are constructive or purely escapist and to the phenomenon of disappearance and reappearance of fantasies in certain phases of the analysis.

It is beyond doubt that there is no danger in asking the patient to bring up his fantasies in his analytic sessions. In the search for short-cuts in psychoanalysis, the study of fantasies may sometimes prove a most valuable contribution. It permits the patient to express certain thoughts pervaded with emotions which in no other way can be so clearly presented than by reporting the contents of his fantasies. The analyst, on the other hand, is supplied with material which is an invaluable aid in his efforts to uncover unconscious strivings and motivations.

THE DYNAMICS OF PHOBIAS. (*Sara Breitbart; October 25, 1950*) The primary purpose of this paper is the understanding of phobic

people and only secondarily the understanding of the symptom. In the past psychiatry focused on symptoms, their causes and the removal of those causes. This method led to an empirical classification which has its merits, but was misleading because the total personality of the individual was disregarded. Psychoanalysis, on the other hand, believes the total personality to be the root of the symptoms. It considers symptoms to be the peripheral, external expression of inner conflicts engendered by a shift in energies from healthy self-realization to self-idealization. As long as such conflicts and their pseudo-solutions persist, the symptoms will be necessary for the continued functioning of the individual. Analytic research and therapy are, therefore, directed toward the understanding and dissipation of growth-retarding forces and the encouragement of growth-enhancing forces.

A phobia is an irrational, indiscriminate fear of any representative of a specific class of objects or situations, such as dogs or open spaces. A person with a phobia feels that contact with the object, or participation in the situation, is a threat to the very essence of his being, and he avoids contact or arranges specific conditions under which contact is less threatening. Phobic persons show similarities in their relationships to the feared objects, although the intensity of the fears they experience varies from mild aversion to terrorized paralysis. The person feels threatened by the object and reacts to the threat with fear and panic. He feels that contact with that object will result in destruction of some kind. Although he may know that consequences other than those he anticipates are likely, he fears the possibility of doom and destruction.

The phobic person's relationship with the feared object is determined by his personality. His behavior is directed toward avoidance or detoxication and is related to the outer, tangible world. The person manipulates himself and the threatening object in three ways: First, by keeping them apart. Secondly, by strengthening himself—for example, by will power or by reason. Thirdly, by weakening the threatening ef-

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fect of the object—for example, by contacting it in the presence of companions. The feared objects have four common characteristics. To the neurotic they are: 1) concrete 2) external 3) unpredictable. And to all people they are 4) either known to be dangerous, factually, or suspected of being potentially dangerous.

Phobias may be classified into three groups on the basis of severity. One group includes persons with one or two phobias of objects rarely met in actual living (such as leprosy, in this country). Such people seldom mention or think of the feared objects, which have little effect on their way of living. They manage to keep anxiety within bounds to the extent to which they manipulate themselves to fit what they believe are external demands. Their phobias are apt to symbolize hated parts of themselves, their own self-destructiveness, the vulnerability of their idealized images, the real self (which is a threat to the pride system), or situations requiring real capacities to master or to solve.

Among persons in a second group, the phobia is a major restricting influence because the feared object is one which is encountered frequently. This occurs when a person's actual capacities are put to the test of reality by himself or by circumstances. In approaching a real life situation which requires a degree of planning or action, he may find himself incapable of performing as his image dictates, and afraid to perform otherwise. These people seem to be unable to tolerate such test situations and seem to have few intrapsychic means of saving pride. The phobic mechanism makes it possible for them to avoid living situations which require choice, planning and decision, and thus to avoid tests.

Group three includes persons with multiple shifting phobias set in a matrix of severe anxiety. Close examination of the development of the syndrome reveals that one or more major solutions of conflict have broken down, leaving the person at the mercy of his contradictory drives and feelings. This may occur, for example, at the death of a person on whom a predominantly self-effacing person has been com-

pletely dependent. It frequently occurs when the idealized image breaks down either through inner pressure, or in combination with external pressure. Under these circumstances the person is literally without a personality and cannot function because his previous functioning has been on the basis of a pseudo-personality.

Analytic therapy with seven phobic patients has not revealed any similarities of character structure other than coincidental ones. However, there is a similarity in the process of intrapsychic movement. Anxiety is close to awareness in all such patients, and is the predominant symptom in the third group. The person with phobias is one who focuses outward, so alienated from himself that he clings to the tangible and the concrete as a means for maintaining the sense of being alive. His attention and energies are focused on the outer world. He experiences his conflicts through making tangible and externalizing part or all of them. Phobias are an accessory solution in this system.

The analysis of phobic patients of moderate to extreme severity is necessarily of long duration. The main focus in the beginning is on being supported, with concomitant defining and encouraging of whatever is constructive in the nature of that person. Being focused externally and being alienated, the phobic patient is removed from his inner sources of strength.

SMARTNESS AND STUPIDITY IN NEUROSIS. (*Bella Van Bark; November 22, 1950*) Published in this issue.

THE NARCISSISTIC TYPE IN PSYCHOANALYSIS. (*Muriel Ivimey; January 24, 1951*) Published in this issue.

ON FEELING ABUSED. (*Karen Horney; February 28, 1951*) Published in this issue.

THE FEAR OF RELAXATION. (*Alexander R. Martin; March 28, 1951*) Published in this issue.

DUPLEXITY. (*Harold Kelman; April 25, 1951*) Published in this issue.

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SURRENDER AS A PSYCHOLOGICAL EVENT.
[Panel Discussion. Harry Tiebout (main speaker), Nathan Freeman, Harold Kelman, Frederick Weiss, Bernard Zuger and Karen Horney (moderator); May 24, 1951.]
Abstract of Dr. Tiebout's paper.

In the past, my aim in therapy has been to build up the ego and make it able to surmount all of life's vicissitudes. Now I have a completely different goal, namely, to get rid of the ego and all of its defenses in order to permit the appearance of the inner self.

My conception of the emergence of the inner self rests on an understanding of the significance of the surrender experience. Dynamically, surrender means to me that the forward thrust of the ego has been stopped. This is a most important event in therapy. The successful therapist is one who can assist his patient in bringing it about.

I define the ego as an organ that enables its possessor to wend his way through the perils of this world, doing its best to keep the individual intact, but of its own nature contributing nothing to the difficulties it may be encountering. It is an agent acted upon by internal and external forces with which it struggles constantly. It gets involved in sponsoring feelings and attitudes which are basically hurtful to it, but which appeal to its sense of fitness and legitimacy. Within everyone, for instance, there is an urge for omnipotence. This is a carry-over from infantile reactions. Such an urge may express itself consciously as a drive to succeed, to be top man. This is generally identified as a goal to succeed and is not looked at askance. Yet in that goal, when you pause to consider it, you will note a thrusting forward. Sometimes this thrust forward has such drive and energy that it seems to propel the individual. If unleashed, it produces an inner conflict between the driving force and the unrest associated with an unfulfilled drive. This flaw in the success mechanism has long been recognized. The solution seems to be to preserve enough forward thrust to insure progress, but not so much as to create an

inner Frankenstein which devours the person who cannot separate himself from his drive. The neurotic individual teeters between an all-out drive, on the one hand, and attempts to obliterate it which, in turn, start a whole new chain of anxiety reactions. Advice to moderate this drive merely confuses the neurotic patient since this thrust forward has an unconscious quality. It is being surcharged with energy constantly and, in turn, furnishes the forces which keep the neurosis going. Such slogans as the "take it easy," "relax, be yourself," and "easy does it" of the Alcoholics Anonymous group are appeals to surrender. When the individual succumbs to these, the drive is stopped, at least for the time being. This is an important first step in any therapeutic attempt. I see this drive as unchecked infantile omnipotence. Unless it is dealt with at its source, the drive will continue in one sector or another.

The first stage of treatment of the neurotic individual is devoted to getting by the initial defenses which serve not only to keep the therapist out, but also to keep feelings in. Then the time comes when the barrier loses its effectiveness. One of the signs of this is the beginning manifestation of feelings in the dream life. In a series of dreams, we see evidences of struggle. We see the defense alignment becoming unsteady, the barrier wearing thin, the feelings emerging. Dr. Horney, I believe, would call this the real self coming to the surface. My understanding of her theory is that she assumes that this inner, or real, self represents the true feeling self; that it has validity of its own; that it lies full grown under the pride system; that once, so to speak, it has achieved the light of day, it should be granted every opportunity to express itself. From my experience, I know that once feeling gets started, it continues on its own momentum. I am impressed by its inability to heed warning signals from reality. The menace of such a situation is immediately apparent and the need to re-introduce repressive measures readily understood. As long as there is an inner tendency to thrust forward, it will attach itself to whatever feeling is coming

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through. The feelings will be ruined by this extraneous element of push and urgency.

I consider the act of surrender a psychological event which places an inner restraint on the expressions of feelings, and that this is necessary since there are elements in initial manifestation of inner feeling which preclude free expression. Surrender slows down the thrust forward, with the result that the feelings as they emerge maintain sound and healthy qualities. This is an invaluable step in therapy.

Interval Meetings at the American Institute for Psychoanalysis

THE APPLICATION OF PSYCHOANALYTIC PRINCIPLES TO TEACHING AND LEARNING. (Part I: Norman Kelman; November 12, 1950. Part II: Norman Kelman; Marie Rasey, guest speaker; December 10, 1950) Teaching and learning are a cooperative enterprise, usually a group experience. General agreement within the group as to purposes or directions is essential for optimal teaching and learning. This does not exclude healthy differences of opinion, which are, in fact, essential if constructive experience and genuine learning are to be achieved. Healthy differing is to be differentiated from neurotic competitiveness which tends to isolate one person from the next and prevents healthy sharing of experience and resources. To the teacher with needs for mastery, any student who fails to agree becomes essentially a competitor. To the student who needs the teacher's approval or the corroboration of his own viewpoint, his colleagues become competitors. In such competitive situations the spirit becomes one of guardedness and inhibition rather than of sharing experiences. Good learning, like healthy growing, involves total participation in giving out and taking in. All of us have experience which is of potential value; good teaching creates situations which will enable these experiences to come to the fore. Optimal learning and teaching is effected when a course serves to raise questions, whet appetites, and open

new vistas for exploration, and when it contributes to an understanding of ourselves, others, our work, and to increased interest in our work. There are four aspects to optimal teaching which may be illustrated by considering how children learn:

- 1) Being curious
- 2) Seeking help
- 3) Trying, failing and succeeding
- 4) Experiencing change

In evaluating, we may ask: does a course encourage curiosity and participation, make help available, stimulate change? It is important that instructor and student evaluate a teaching program constantly and take actions to improve it.

All neurotic values are obstacles in the way of effective teaching because they are prone to work against the search for truth, which is the purpose of real teaching and learning. Thus, expansive and perfectionistic teachers would tend to emphasize agreement rather than questions, doubts and honest confusion. A self-effacing student might regard questioning by the instructor as presumptuous. When resignation is a factor, the need to avoid friction becomes paramount, and discussion becomes sterile with the focus on mediation rather than truth. In summary, optimal teaching and learning occur when all members of the group are interested in increasing their own knowledge and understanding. This will make for fundamentally mutual interest. Friction and difference of opinion will be seen as desirable aspects of learning. Continual evaluating is necessary for an optimal teaching and learning situation.

TENTATIVE FORMULATIONS IN GROUP ANALYSIS. (Sidney Rose; January 21, 1951) This is a preliminary report on a group analysis project started 15 months ago by the Association for the Advancement of Psychoanalysis in cooperation with the Candidates Association of the Institute.

One of the objectives of this project is the evaluation of the possibilities and limitations of group analysis, working with the theories of Dr. Karen Horney.

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Currently, there are nine groups conducted by seven analysts. In general, each group meets once a week for a session lasting an hour-and-a-half, although the frequency of sessions may be increased, and occasionally is, by decision of the group. Each group is made up of approximately eight adults of both sexes and of varied ages. The members may have a wide diversity of background, education, kind of problem or personality.

Occasionally, a group member is in individual analysis as well, while other members may at times have an occasional individual session with the group analyst when under particular stress, or because of a need to work further at some special problem which for any reason may be difficult for him to discuss in the group.

Each member is seen in consultation before admission to the group for a dual purpose: first, the analyst must know something of the life history, character, presenting symptoms and general seriousness of purpose to decide whether a prospective patient could profit from therapy, and, further, whether he would be a constructive or an unduly destructive member. The patient has in this interview an opportunity to learn what will be the procedures, goals, and general arrangements. At this time the general rules may be also discussed, such as the understanding that the affairs of others in the group cannot be discussed outside; that members are expected to listen to what other group members say without interrupting, and with a real effort to understand, and that, while discussion is otherwise entirely free, it should be limited to subjects which have personal significance.

At the first session, some analysts make a few introductory remarks about general goals of therapy. Others begin work directly by encouraging the expression of thoughts, feelings, problems; attitudes toward problems, or behavior, or viewpoints presented by other group members, or by the analyst. Patients who at first do not feel ready to talk of themselves are not pressed to do so.

The patient's expression of his own diffi-

culties, his life history, past or present experiences and problems form the basis for analytic work, as in individual analysis.

The goals of group analysis are the same goals as in individual analysis. We aim to enable a patient to listen to himself, recognize his pretenses, his anxious or compulsive or vindictive ways, and learn to appreciate the difference between his own neurotic pride or self-contempt and his genuine feelings. We would see improvement as an increase in the feeling of being an active determining force in his own life; the ability to take healthy, legitimate responsibility, to formulate and live by his own values without needing to force them on others, and to make decisions on the basis of his genuine interests and desires, in accordance with external reality, with acceptance of the consequences of these decisions as they affect the development of his own potentialities and real welfare.

Advantages in this type of therapy are many. The attitudes and personal reactions between patients are constant and stimulating material of value both to the patients involved, and to the other group members who see and understand what is happening and who invariably find that whatever is discussed has some application to themselves. If individual patients become so domineering, sadistic or exploitative as to endanger the real value of the group for the others, this becomes apparent to all and can be analyzed, understood and can be a helpful experience for all the group.

Because of the variety of examples and instances brought up, differences between such things as selfishness and healthy self interest, between healthy and neurotic giving, can be clarified far earlier than in individual analysis. Because the analyst is less a participant and more a commentator, or interpreter, there is less rejection of his views as his own personal bias by patients who would, in individual analysis, feel he is an adversary and his comments an attack.

The intimate knowledge of the real problems and sufferings of others enable patients to feel less isolated and disgraced by their own weaknesses and fears, while others whose pride interferes with accepting help

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begin to give up this pride as they see others profiting by using this help. Seeing others improve often encourages the inert or the hopeless to feel less so. Interpretations which are agreed upon by several group members carry a greater sense of conviction. The factor of human help occurs more frequently in the group and acts as a warming and relaxing force with anxious and withdrawn patients. Spontaneous criticisms and ways of attempting to help others furnish valuable material for analysis. A varied perspective on what is taking place in individuals and in the group can be had through the free expression of feelings about what is going on in the group, which also includes rejection or modification of interpretations.

Further, patients become aware of the consequences of their neurotic difficulties very soon, as the reactions of the group bring them out frankly and quickly. This applies particularly to externalizations. Individual blocking or inertia is less time consuming than in individual work, since some other group members have sufficient interest and drive to present further material. Constructive forces are stimulated by the value that comes from playing an active role, giving help and seeing that others listen with interest to one's suggestions.

Finally, the variety of individuals and of problems in a group stimulate different aspects of a person's attitudes, making them available for analysis, while group operation on democratic principles is in itself a supportive and stimulating experience.

What are the problems and disadvantages of group analysis as compared with individual analysis? Some are less complex, and as the analyst's experience increases can be used constructively, or at least prevented from being a real obstacle to work. Among these are the tendency toward incorrect, ill-timed or overly harsh interpretations by group members. This is rather generally mitigated or corrected by other group members who tend to be sensitive to the real suffering of others. The analyst is also free to add comments or suggest other interpretations. There is also the problem of block-

ings, which can too easily be overlooked unless the analyst is alert in inquiring and investigating them as carefully as in individual sessions.

The problem presented by aggressive, overbearing individuals, the compulsively argumentative, and the arrogant listeners who tend to contribute little, saving their discussion for the informal talk after leaving the session, can be temporarily exasperating to both analyst and group members. This is usually brought up for frank discussion by members at a subsequent discussion, but may be introduced by the analyst if it becomes visibly disturbing. When a single individual continues this, in spite of frank examination of its motives and meanings, the mass objection of the group occasionally results in his withdrawal from the group.

Other problems in group analysis are more difficult to solve, and ways of dealing satisfactorily with them have not yet been worked out. These are the lack of time to cover the really significant material available and needing discussion; the comparative scattering and lack of continuity, and the fact that a member's urgent, serious, current problem often cannot be presented when it would be of most value to him because of the needs of other patients and the actual realities of time. Occasionally, this can be met by the use of an extra individual session. This, however, is often a loss to the group and to the individual. Lastly, the analyst's inability to know thoroughly what is going on in the lives, feelings and thoughts of so many individuals simultaneously is a real drawback.

The analyst's role in group analysis varies to some extent with his way of working. Some group analysts tend to be silent observers, participating only with their attention, and giving a rare interpretation or injecting only an occasional question or general comment. Others enter the discussion actively, as a partial participant, giving interpretations, asking questions, stimulating the more silent by expressed interest in their views.

In general, the analyst must be attentive to group feelings and needs, and in particu-

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lar to special sensitivities of individuals. He must be alert to departures from democratic principles, and if possible present this for analysis. He will keep in mind what is the greatest good for the greatest number over a long period of time, so that the urgent need of more time for a particularly disturbed individual will not become too extended a procedure. The needs of others in the group may have to remain in the background, but need not occur continuously. He will identify and encourage all constructive movement and any efforts aimed at better understanding of oneself and others. He will point out occasional fruitless discussion of matters of no real personal interest to any members. Although he will be alert to misunderstandings or misinterpretations which he will encourage the group to correct, he will in general encourage candid and serious expressions of opinion and feelings regarding his own remarks, and the remarks, attitudes or acts of other members.

Group analysis offers the great advantage of economy of time and money. The factors of consistent, generally constructive human relations at work on a common project also seem of special value in making growth and change possible.

During the first weeks of therapy, most patients feel freer to talk revealingly of themselves, and describe a feeling of stimulation toward thoughts about their pretenses, their cherished weaknesses and neurotic pride. While many patients mistake this for real change and growth, it can only be considered an awakened and stimulated interest. By the fourth or fifth month of work, an occasional patient soberly mentions that he can see real change in himself in the direction of greater strength, less irritability, more willingness to take responsibility for himself. A different type of patient will instead observe that feelings of weakness, fatigue and anxiety have lessened. Later in the work, changes are seen in deeper areas of disturbance: changes in philosophy of life, or a change from cynicism to frank interest and humility.

After a year of experience and observation of group analysis, it is generally felt

among the group of participating analysts that this work is of great value to the patients and to the analyst. Its particular quality of liveliness, constant stimulation and spontaneity cannot be questioned.

It brings up many questions to which answers may be found in succeeding years of work. One must evaluate questions such as: Is group analysis of equal value without any individual analytic work? Can we see more easily in group analysis what produces individual change than in individual analysis? Does it stimulate the individual to probe within himself more quickly, and become aware of constructive or destructive forces within himself sooner?

THE MEANING OF SELF-REALIZATION. (*Nathan Freeman; February 11, 1951. Isidore Portnoy; March 11, 1951*) Two successive meetings were devoted to this topic. The first was spent in a general discussion of psychological approaches to the problem.

It was agreed that the aim of analytic therapy was liberation of the constructive forces for the purpose of self-realization. Self-realization was defined as a process of utilizing constructive forces inherent in man toward realizing his own healthy potentialities and gifts. Clinical examples demonstrating activity of constructive forces were presented.

At the second meeting there were attempts to clarify further the meaning of the real self and of self-realization as a biologic principle and a biologic process. Biology would, in this sense, include the physical, psychological, spiritual and moral. It was felt that it would also include the whole area of inter-personal and intra-psychic relationships. Self-realization was seen as a dynamic process possible only in a human atmosphere conducive to such movement, which would include striving to fulfill general human potentialities, as well as unique individual capacities. It would involve moving in the direction of wholeness and unity. Such movement would necessitate that the individual first acquire the strength to resist attempts at spurious harmony and integration. A case example was presented illustrating con-

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flict, anxiety, neurotic attempts to solve the conflict, and finally a healthy stand for the individual's own real interests.

Reference was made to the book *The Meaning of Evolution* by George Gaylord Simpson, in which the author stated that human beings in the course of their evolution have developed certain unique qualities, capacities and strivings which are now a part of basic human nature. These include a striving toward ethical standards, capacities for formulating plans, purposes and goals, and the unique ability to take personal responsibility and to play an active role in influencing future evolution. It was felt that Simpson's views are in accord with Dr. Horney's concept of the real self.

EVOLUTION OF THE HORNEY THEORY. (*Harold Kelman; April 8, 1951*) In a discussion of one system of thinking, for comparison, another must be posited which purports to have, or projects, possibilities for a more comprehensive understanding of human nature. The position taken determines the perspective one has—in this case of Dr. Horney's evolving theories. Three main factors determine my position and perspective: Horney's evolving theories, my own notions of holism and our position in the system of things—in the context of the current historical perspective of ideas known. The spirit of this evaluation is scientific. By this is meant that the observable facts are described empirically, objectively and with neutrality; the spirit of description is under the aegis of the moral valuation of truth; and the process of description, the evolving of whole pictures, concepts and theoretical systems is aesthetically beautiful to watch as well as the product to be seen at any point. The scientific spirit is then an expression of integrity to fact, morals and aesthetics.

(In this abstract the following abbreviations will be used: *The Neurotic Personality of Our Time*—N.P.O.T.; *New Ways in Psychoanalysis*—N.W.P.; *Self-Analysis*—S.A.; *Our Inner Conflicts*—O.I.C.; *Neurosis and Human Growth*—N.H.G.)

Holism deals with concepts that are psycho-physically neutral. That is, they

use a minimum of value-toned terms which are equally applicable to physical and psychological processes; can describe and lead to an understanding of wholes, of organism in environment, living as a unitary process; are characterized by openness and system thinking.

Horney's theory, by implication throughout and in parts of N.H.G. by explication, is characterized by system thinking. Since its beginning, with N.P.O.T., it has had the quality of openness, of constant expansion, extension and revision with shifts of emphasis of previous concepts which take their proportionate places as imbedded aspects of a comprehensive whole. Some terms—such as conflict and anxiety—are psycho-physically neutral, while many like the concept of character structure are purely applicable to psychological processes. The limited place of physical processes in Horney's theory reflects a large gap, as do the limited number of psycho-physical concepts.

A theory is a set of presuppositions and assumptions, a system of concepts derived from, and checked against, observed and described clinical facts. A theory characterized by openness should be able to be expanded, extended and revised, and concepts no longer adequate be discarded. It should also be able to stimulate new questions, and through them bring to light new facts. Horney's theory excellently fulfills these qualifications.

A theory should serve as a guide, a point of reference for empirical studies, allow us to question nature intelligently and with economy, and offer us a background for the interpretation of empirical data. A general theory covers a wider field and helps us to unify the field. The alternative to no theory is chaos. Collecting data blindly leads to confusion and defeats comprehension. Horney's work adequately fulfills the criteria of a good theory.

It is required of a theory that it be consistent with the facts and internally consistent. Horney's theory fulfills this requirement better than any psychoanalytic theory to date. The consistency of her theory with the whole body of science remains to be de-

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terminated. A theory should have sufficiency to account for known facts. Horney's theory accounts for more observed facts than other theories and by its nature is constantly turning up facts awaiting new formulation. The theory reveals that its relevance to the facts is close and clear because it is constantly derived from, and checked against, daily psychoanalytic practice. A theory should be clear. The lucidity of her writing and the excellent organization of each book and its integration with previous books gives an impression of greater clarity and unitary theoretical coherence than exists. Proof of the previously existing gaps is the filling in of some of these gaps in her subsequent books.

A fully evolved theory could be asked to fulfill the above requirements. Of an evolving theory such as Horney's, it can be required that it more or less fulfill these criteria—more so as it evolves—and that it move more and more toward approximating their fulfillment. An evolving theory has the limitation of not being sufficient for adequate evaluation, and the advantage of continuing openness as a corrective against the error of forming too early a closed system. Her theory is as yet loosely systematized, and only in her last book does system thinking *per se* become explicit. Only with this last book does her theory approximate a theory of human nature still with the predominant focus on the psychological. A theory fulfilling the above requirements should make possible critical constructive evaluation by persons not analytically trained and the further evolving of the theory by other analysts. Neither have obtained significantly with any analytic theory to date.

Briefly, Horney theory is evaluated historically with reference to seven holistic concepts: direction, pattern, process, conflict, anxiety, self-system and integration.

Holistically, "direction" does not mean "goal" in a teleological sense. Direction defines the intrinsic pattern of a movement, such as the movement toward self-realization. Goals do not define a direction, but the intrinsic pattern of movement defines what can become a goal. This notion is

implicit throughout and explicit in *N.H.G.*, but even there the notion of goals as entities still is apparent. In *N.P.O.T.*, the concept of direction away from self is implied in the concept character structure as a defense against basic anxiety, and the direction toward self in the postulate of optimism regarding man. In *N.W.P.*, direction toward self is more clearly implied in the words, "His real spontaneous self." With *S-A*, the direction of toward and away from self become more definite in the possibility of productive self-investigation. The direction away is more explicit in the moves defined in *O.I.C.*, and the moves toward in the goals of therapy there described. In *N.H.G.*, the word and concept direction is used in terms of the neurotic process, the three main solutions, the move toward self-realization, and toward total participation in the world in the section entitled, "A Morality of Evolution."

Horney has not used the term "pattern" in her books, but has done so lately in lectures and with some of its holistic implications. Pattern is a holistic concept, a way of describing the life process, in terms equally applicable to its physical and psychological aspects. Horney's concept character structure is a psychological concept and refers only to the neurotic aspect, and hence a limited psychological aspect of the holistic concept pattern. This has been one of Horney's most fruitful formulations and yet I do not feel it accidental that it appears infrequently in *N.H.G.*, where the emphasis on growth appears and system thinking emerges. This concept was already well defined in *N.P.O.T.* in which the components of character were first collected under the need for affection, the quest for power, prestige and possession, and neurotic competitiveness. In *S-A*, twelve categories of trends were listed. Character structure appeared as the moves with relation to others—of toward, against and away—in *O.I.C.*, and in *N.H.G.* as the self-effacing, expansive and resigned solutions, with the focus on the intrapsychic. Here again the physical aspects of pattern are almost missing.

The concept process is clearly implied

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throughout Horney's work and quite explicitly in *N.H.G.* Much of her language is in process terms. In *N.H.G.*, the neurotic process is clearly defined as the process of actualizing the idealized image. The process of self-realization is clearly described but not so clearly as the neurotic process, nor is it spoken of as a process. For consistency I believe it should be spoken of as the process of actualizing the real self. The concept process, implicit and explicit is almost totally with regard to the psychological and with very little mention of the physical aspects of process in the direction of sickness or health.

The concept of conflict is explicitly used and fairly well defined in *N.P.O.T.* In *N.W.P.*, Horney speaks of the central role of inner conflict. In *O.I.C.*, conflict is clearly defined as basic conflict. In *N.H.G.*, central inner conflict is added and leads to a radical revision in the whole system. In *O.I.C.*, basic conflict was defined as the core of neurosis and was given a central position but with the emergence of the concept of central inner conflict it relinquishes its central position. Also in *O.I.C.*, basic conflict was considered a whole process while with central conflict taking over the main position it becomes a part process. Basic conflict is still an embedded part of the whole theory but its position and emphasis has changed. Conflict is a holistic term, but here again the psychological aspect is extensively dealt with and little is said about the physical aspect of conflict.

In *N.P.O.T.*, basic anxiety is extensively defined as to its genesis and, to an extent, as to its perpetuation. More is added in *N.W.P.* regarding basic anxiety and a little in *S-A.* With *O.I.C.*, a major addition to the concept is made as it relates to basic conflict and mainly with regard to the perpetuating factors of basic anxiety. With *N.H.G.*, a further major addition is made in its connection with central conflict. With each addition the concept of basic anxiety becomes expanded, extended and revised, and hence a changing concept. Although with *N.H.G.* a major revision of the concept is made, actually very little space is devoted to it which I do not believe is

accidental. I believe the importance of the concept of basic anxiety has become less as Horney's whole theory has expanded. The concept of basic anxiety has been a fruitful one, but I feel the time has come—and is already there in *N.H.G.*—for a radical revision. I believe a theory of anxiety, and not of basic anxiety, is essential; and a theory of anxiety which will give appropriate place to the physical as well as the psychological aspects which basic anxiety almost entirely left out.

In *N.P.O.T.*, Horney speaks of "His real spontaneous self." The terms neurotic self and pseudo-self appear in later books. The concept Idealized Self is clearly defined in *O.I.C.* In *N.H.G.*, the concept of the real self is fairly clearly defined and the term despised self is frequently used. Operating with such a number of self concepts, I believe, creates difficulties. The problem, I feel, can be clarified and unified in the concept self-system. Sullivan has made an attempt in this direction. My own ideas are evolved from Goldstein, Angyal, Cassirer and Langer, and developed in my concepts of the dreaming process. Further knowledge of the symbolic process, I feel, will aid in the development of the concept self-system which is prerequisite to a holistic theory of anxiety on which I have made some beginnings.

System thinking is implied throughout Horney's work and reaches its first explicit formulation when she speaks of the pride system in *N.H.G.* I feel the concept of system is implied in her concept of the real self. For consistency with the pride system, I feel it should be spoken of as the real self-system. The concept of self-system is only vaguely implied, but a number of the parts are already there, ready to be integrated with necessary revisions by a unifying hypothesis like the self-system concept.

Integrating is a holistic term and describes the pattern of the process of living —i.e. of organism in environment. Integrating is of part and whole processes and is in the direction of health or sickness. A human being is always integrating, more or less, well or poorly and in proportion to his ultimate possibilities as a human be-

ing and a unique individual. The concept of integrating is implicit throughout Horney's work. It becomes partially explicit when Horney speaks of the real self. She says, "I speak of the real self as that central inner force which is the deep source of growth." And, "When the real self is locked out or exiled one's integrating power too, will be at a low ebb." In these two quotes integration as a function of the real self seems to refer to healthy integrating. In another place, "Despite his early attempts at solving his conflicts with others, the individual is still divided and needs a firmer and more comprehensive integration." The comprehensive integration here referred to is self-idealization—a comprehensive neurotic solution. At this point integration is denoting something sick. Explicit are the two directions of integration, toward health and toward sickness. Implicit, I feel, is the holistic notion of integration as I have defined it. As throughout, physical aspects are little mentioned.

Holism emerges more explicitly in *N.H.G.*, a direction which I feel will come more into focus in Horney's future works.

A SCHIZOPHRENIC PATIENT IN TREATMENT. (*Harry Gershman; May 20, 1951*) The schizophrenic patient offers us an unparalleled opportunity for the study of psychopathology. In schizophrenia, as in advanced organic pathology, we see the advanced stages of pathological functioning. An intimate knowledge of the psychopathology of schizophrenia is as indispensable to the expert psychoanalyst as is understanding of pathology to the expert internist. Many of the dynamic concepts seen in neurosis appear in the psychotic in the purest culture. Concepts such as conflict, pride, self-hatred, major solutions, magical solutions, fragmentation and alienation from self can be observed and studied in their ultimate expression in the psychotic.

Because schizophrenia represents the most advanced state of psychic disintegration, all diversified approaches can find evidence to substantiate their particular theory. It is important to differentiate the substance from the form in psychotic pro-

ductions. The language a patient uses varies in form. Some speak sexually, some politically, religiously, commercially, or artistically, etc. But in substance the patient is always talking about himself, in relation to himself or others.

Lenny, the subject of this discussion, is a 22-year old schizophrenic boy who has had 100 analytic hours in a period of two years. In many ways his early environment is a typical background of schizophrenics. The mother was and is a highly nervous individual given to explosive outbursts; the father is an arrogant, vindictive, domineering person. With such an environment, the infant is confronted by massive rejection almost from the start. This overwhelming basic anxiety prevents him from developing effective strategies to cope with life.

Among the many problems that were evident in treatment, one was particularly in the foreground. Sensitivity to coercion really meant to him a need for "absolute freedom." The remotest casual expectation was experienced as a ruthless encroachment upon one's privacy. Sensitivity to pressure expressed itself not only in inter-personal relationship but in physical ones also. He could never wear heavy clothes, and even on the coldest days refused to wear a coat or hat. Shoes and collars had to be several sizes larger. He could not stand any appointment for the next day because it would weigh too heavily on his mind, and ultimately make him so tense that he couldn't keep it. Any encroachment on this absolute freedom resulted in his feeling trapped, being put on the spot, or being made to do things. These feelings were experienced with hallucinatory vividness as of walls closing in on him.

With such aversion to restriction of any kind, one might expect that he could embrace laxity or relaxation from these confines. But nothing is farther from the truth. Any deviation from routine terrified him. The routine might pertain to the analysis, his activities, or even diet. Any change, however minute, in the office arrangement, was quickly noticed and fear expressed in a disguised fashion. Caught in this unsolvable conflict, wherein any expectation of

SCIENTIFIC MEETINGS

him is experienced as unbearable coercion, and any real freedom throws him into panic, the tragedy of schizophrenia is unfolded.

His relative position in intrapsychic conflict was most clearly described in dreams. When identified with his pride, he described his feelings as follows:

"Sometimes I have momentary feelings of absolute power. That usually happens at night. My mind is in a fluid state—it gets bigger and bigger. It becomes like the whole world. Then my mind is a zenith star—I have complete freedom. I am potent—I could lift the whole world. That one second you live forever. You can't stay up there for any length of time. My power scares me! Then I want to be weak again, on my knees. It's almost unnatural—I am afraid I am going crazy. I am afraid of my strength—it's infinite."

There you have it! This is the perfect ultimate of power and control in the search for glory that Dr. Horney speaks about. It is almost conscious and audible in the psychotic. In the neurotic it is unconscious, by and large.

Lenny also described how he feels when identified with his hated self.

"I am on the verge of a depression—so lethargic. Slept 16 hours like drugged—woke up drugged. No ambition. My appetite is gone. I have no interest in anything. I have a headache—my stomach is sour—I'm just disgusted with myself—just like horse-shit flowing in my veins. Sometimes I look into the mirror and see a funny-looking animal with oversized brains. It appears curious—then you listen to your voice. It sounds different—you get scared. My God, are you going crazy?"

As long as he is identified with the proud self or the hated self, he is able to achieve some comfort. In between the two he gets caught in conflict. This he attempts to avoid like the plague. That often puzzled me until one day he graphically portrayed what it means to be in conflict.

"My mind becomes a big chaos—I can't harness my ideas. They are like wild stallions. My mind becomes a big flaming wheel in complete turmoil. Flames keep

burning in this blazing inferno. The flames churn and churn. I find I cannot channel them."

This is the conflict that Lenny is constantly running away from.

We have seen how Lenny must move away from conflict because of its intensity. In moving away he also moves away from his real feelings. This in part explains his feelings of emptiness, vacuousness and shadowness. It is to be observed that the process of alienation is not merely a consequence of various facets of his neurosis, but is an active, independent drive which has a momentum of its own. Its function is to remove a person from conflict. The crucial difference between psychosis and neurosis lies in the intensity and quality of alienation. If we measure the degree of alienation in neurotics in inches, that of psychotics will have to be measured in light years. This degree of alienation, I feel, is responsible for Lenny's remarkable capacity to look at his character structure with such clarity. And it is not unusual for psychotics to reveal such amazing insight. They can do it because of their perspective. The vantage point is one of looking down from a great height. Unfortunately this same alienation which permits such penetrating vision blocks the assimilation of these insights too. Although they discover, develop and even work through some of these insights, they do not really feel them.

Two principles must be borne in mind in the therapy of psychotics. The first is that words have ceased to have meanings for them. Elaborate discussion of dynamics is a waste of time and falls in with their neurotic use of the mind to solve all problems. One must feel along with the schizophrenic because they can only respond to genuine feelings that must be kept bombarding them time after time. This cannot be done arbitrarily as a matter of technique. The analyst, I feel, must have a genuine liking for the particular patient, otherwise it is no go. That has been my experience. As Lenny often said, "Doctors are interested in my problem, but not my trouble."

SCIENTIFIC MEETINGS

The second principle referred to his wandering and temporariness. This calls for a steadfastness, continuity and patience that often tests the caliber of the analyst to the utmost. Like scared rabbits, they can smell and react to hostility thousands of miles away. Only if the analyst understands and

feels the tragedy that is schizophrenia can he help him. At best, it is a long and arduous task that invariably leads to the analyst's better understanding of psychopathology, but unfortunately does not produce rapid clinical improvement in the patient.

ANNUAL REPORTS: 1950-1951

The Association for the Advancement of Psychoanalysis

During the year 1950-1951, the Association continued to promote and integrate its established program. Our growth was augmented through closer cooperation with the Institute and other professional groups.

The character of the Scientific Meetings was improved through broader participation and carefully considered discussions. A plan for having two prepared discussants for the papers at the Academy Meetings was instituted. Such meetings will be a part of the regular program in future.

The Interval Meetings have continued to encourage original contributions. The material presented indicates movement in two important directions: a better understanding of group participation in education and therapy, and a recognition and mobilization of constructive forces in analytic therapy. As an expression of this latter direction, a meeting was devoted to the increasing possibilities for effective analytic therapy of the psychosis.

Several members attended the American Psychiatric Association convention at Cincinnati. Papers were read by Dr. Alexander Martin, chairman of the A.P.A. Committee on Leisure Time Activity, and Dr. Bella Van Bark. Doctors Horney, Harold Kelman, Martin and Weiss participated with Doctors Ewen D. Cameron and Bernard Glueck in a Round Table Discussion on "Moral Values in Therapy." Dr. S. Spofford Ackerly was the moderator. A Scientific Exhibit, sponsored by the Association in cooperation with the Institute and A.C.A.A.P., served to inform A.P.A. members of our function and our educational program

for the profession and the community.

The Foreign Relations Committee has carried on an increasing exchange of literature with foreign authors and societies. Articles by Dr. Horney and Dr. Weiss have been translated into French and published in *Psyche*.

The research project in Group Analysis, being carried out in cooperation with the Candidates Association, has expanded. There are now ten groups conducted by seven analysts.

The American Journal of Psychoanalysis has enlarged its circulation and has been included in the libraries of a number of educational institutions.

The Bookshop continues to be a source of income to the Association and a convenience to the members.

The members of the Institute, Candidates Association and friends joined us in celebrating our tenth anniversary at a dinner at the St. Moritz on June 2, 1951.

—MURIEL IVIMEY, M.D.
President

The Auxiliary Council to the Association

Maturation and the effective deepening of the group spirit have characterized ACAAP's total functioning in the past year.

Opening the year at the Hotel New Yorker on Sunday, October 8, 1950, with its largest attendance (375) at the Dean's Party, ACAAP fostered the mutuality of purposes of the four participating organizations: ACAAP, the Institute, Association and Candidates Association of the Institute. The theme of the afternoon was "Group Activity as a Growing Experience." The speakers were: Miss Minerva

Ellis, Miss Sophie Bell, Doctors Karen Horney, Muriel Ivimey and Harold Kelman.

The seminars continued to serve their primary purpose, "Public Education in Psychoanalysis." The average attendance dropped to 45. Two seminars were on "Literary Figures in the Light of Modern Psychoanalysis." The other four were:

"Sex and Neurosis." Dr. Abe Pinsky.

"Dr. Horney's Theory of Neurosis." Dr. Isidore Portnoy.

"Seminar for Clergymen." Dr. Paul Lussheimer.

"Parent-Child Relationships." Dr. Frederick J. Wertz.

The monthly lectures at the Henry Hudson Hotel showed a further drop in attendance. To increase their attendance and those of the seminars and to expand membership, the plan for next year is to give a series of six free lectures by each analyst conducting a seminar, just prior to the first session.

Lectures given this year were:

"Fathers and Children" (Dr. Hugh Mullan); "Dreams Help Us Grow" (Dr. Harry Gershman); "The Appeal of Mystery Stories" (Dr. B. Joan Harte); "Psychoanalysis and Religion" (Dr. Paul Lussheimer); "Leisure Time—Burden or Benefit" (Dr. Louis E. DeRosis); "Work—Satisfaction or Drudgery" (Dr. Sara Breitbart); "Human Conflicts in Comics and Cartoons" (Dr. Nathan Freeman).

The annual symposium (see page 51) was held on April 4, 1951 at the Henry Hudson Hotel. An audience of about 800 showed its interested response in a spirited question period. As an expression of its constant quest for new audiences, ACAAP will move next year to Town Hall on March 19, 1952, with a different type of program.

In addition to its innovations, ACAAP continues its regular functions: the orientation meetings for new members; the monthly discussion groups conducted for members, with three analysts participating; the publication of pamphlets; the sale of its publications to all parts of the world, and the maintenance of the lecture bureau through which over ninety different lay

groups were addressed by analysts of the Institute.

ACAAP extends its appreciation to Mr. Nathan Shainberg for his generous gift of \$500.

—Harold Kelman, M.D. (*Chairman*)

—Isidore Portnoy, M.D.

ACAAP Committee (AAP)

—Hugh Mullan, M.D. (*Chairman*)

—Dominick Barbara, M.D.

—Milton Berger, M.D.

—Sidney Rose, M.D.

Candidates Committee (AIP)

American Institute for Psychoanalysis

Board of Trustees

The President has the honor to submit the Institute's annual report. During the past year the Board met eight times and called two membership meetings.

The membership was the following:

1) Members: Doctors Karen Horney, Muriel Ivimey, Harold Kelman, Elizabeth Kilpatrick and Alexander Reid Martin.

2) Associate Members: Doctors Valer Barbu, Sara Breitbart, Ada C. Hirsh, Paul Lussheimer, Isidore Portnoy, Frederick A. Weiss and Antonia Wenkart.

3) Auxiliary Members: Doctors Eleanor Crissey, Nathan Freeman, Harry Gershman, B. Joan Harte, Norman Kelman, Emy Metzger, Hugh Mullan, Geoffrey Osler, Abe Pinsky, Bella S. Van Bark, Joseph D. Vollmerhausen and Bernard Zuger.

At the meeting of June 11, 1950, the Board approved the recommendation of the Faculty Council that Dr. Paul Lussheimer be made a Provisional Training Analyst, and its recommendations for appointments to the teaching staff for the academic year 1950-51. The Candidates Association gift of \$350 was accepted with appreciation by the Board. The Trustees moved in favor of forming a clinic.

The following gave their annual reports at the membership meeting of September 30, 1950: President, Treasurer, Faculty Council, Membership and Grievance Committees.

A Board meeting followed which was

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adjourned and continued on November 12, 1950. Some matters brought up for discussion at this meeting were acted on in the meeting of December 10, 1950. At the latter meeting the Board moved to increase the Institute's fire insurance to \$15,000, its owner, landlords and tenants liability to \$100/300,000, and Workmen's Compensation insurance on its payroll of \$4,680. The President was empowered to proceed with obtaining an absolute charter for the Institute to replace its provisional charter, due to terminate on December 20, 1951. The Board informed the Faculty Council that legally the Institute could give a special short course to foreign students and asked that they prepare and submit a tentative curriculum. The Board directed the Faculty Council to include in its acceptance letter to candidates not licensed in New York State that their supervised analysis must be with the permission of the authority of the hospital of which they are a staff member.

At its January 21, 1951, meeting the Board recommended that the Faculty Council submit a form acceptance letter which will be sent to candidates who are not at the time licensed in New York state. A Civil Defense Committee was formed, which arranged for two lectures on Atomic Disaster held February 14 and February 21, 1951.

On February 11, 1951, the Board approved the recommendation of the Faculty Council that Dr. Isidore Portnoy be a Provisional Training Analyst. It moved in favor of buying or erecting a permanent building for the American Institute for Psychoanalysis. By May 31, the Building Fund had collected \$2,570 and received \$67,000 in pledges.

No significant matters were acted on at the March 11, 1951, meeting.

At the Annual Meeting on April 8, 1951, the following officers were elected: President, Dr. Harold Kelman; Vice-President, Dr. Muriel Ivimey; Secretary, Dr. Sara Breitbart; Treasurer, Dr. Frederick A. Weiss.

At the Membership Meeting which preceded the Annual Meeting of the Board,

the President, Treasurer, Dean, and Chairmen of the Membership and Grievance Committees read interim annual reports. Doctors Sara Breitbart, Muriel Ivimey and Paul Lusheimer were elected Trustees for a period of three years. Dr. Isidore Portnoy was elected Chairman of the Membership Committee and Doctors Harry Gershman and Bernard Zuger as members. Dr. Elizabeth Kilpatrick was elected Chairman of the Grievance Committee, with Doctors Paul Lusheimer and Isidore Portnoy as members. The Membership recommended to the Board that it obtain information from the American Medical Association, American Psychiatric Association and the New York County Medical Society on giving information at public inquiries conducted by courts, the Federal Bureau of Investigation or other public agencies in reference to subversive activities concerning confidential material obtained from patients.

The Board at the last meeting on May 20, 1951, expressed grateful appreciation to Mr. Nathan Shainberg for his gift of \$500 and to its President for his contribution of \$500. The Board approved the Faculty Council's recommendation that the Institute conduct an all day seminar at Hudson River State Hospital in September, October, November and December for its staff and adjoining State Hospitals. This program has the approval of Dr. Newton J. T. Bigelow, State Commissioner of Mental Hygiene.

The Board approved the following recommendations of the Faculty Council as instructors for the academic year 1951-1952:

LECTURERS: Doctors Valer Barbu, Sara Breitbart, Ada C. Hirsh, Karen Horney, Harold Kelman, Elizabeth Kilpatrick, Paul Lusheimer, Alexander Reid Martin, Isidore Portnoy, Frederick A. Weiss, Antonia Wenkart.

ASSOCIATE LECTURER: Doctor Bella S. Van Bark.

ASSISTANT LECTURERS: Doctors Eleanor Crissey, Louis E. DeRosis, Nathan Freeman, Harry Gershman, Norman Kelman, Emry Metzger, Hugh Mullan, Geoffrey

Osler, Abe Pinsky, Joseph D. Vollmerhausen, Bernard Zuger.

GUEST LECTURER: Dr. Julius Nelson.

—HAROLD KELMAN, M. D.

President, Board of Trustees

The Dean

As Dean of the Institute and Chairman of the Faculty Council, it is my duty and privilege to present the following report on the state of the Institute and the main activities of the Faculty Council during the past year.

The Faculty Council has met a total of 30 times in order to fulfill its functions with regard to the teaching program and the admission of candidates, as prescribed in the By-Laws of the Institute. The number of candidates in training has increased from 63 in 1949-1950, to 80 in 1950-1951; the teaching staff now numbers 25; the training analyst staff now numbers 11. Thirty-three applicants were considered by the Admissions Committee. The possibility of offering the full training program leading to certification to psychiatrists from foreign countries was considered, and we are now prepared to admit such candidates. In addition, the Faculty Council is preparing a shorter course to offer foreign psychiatrists who wish to remain in this country for training less than one year.

In the forthcoming year, 18 courses will be offered. This includes one of special interest to general physicians entitled, "The Neurotic Patient in Medical Practice." We shall continue to give courses in the New School, and this year have introduced two new ones: "Moral Alternatives in Our Time" and "Culture and Neurosis." In response to the request of the candidates, the Seminar on Personal Case Histories, formerly given only at the New School, will now be scheduled for candidates and other physicians at the Institute, and will be entitled, "Clinical Conferences on Case Histories."

The policy of including senior candidates as associate and assistant instructors will be continued in several courses. This has proved a valuable experience for the candidates involved, and has afforded an

increasing reservoir from which to draw instructors. The course evaluations have indicated that this procedure enhances rather than diminishes the value of the instruction.

One of the most important projects of the Faculty Council has been a thorough evaluation of the teaching methods, including the grading of courses and term papers. It has been recognized and made a matter of explicit policy that grades are valuable only as they enable the student to further his learning. As a consequence, emphasis is being placed more and more on continuous evaluation of the student's work and on more extensive comments by instructors on term papers, rather than on the letter grades. Candidates are now being encouraged to rewrite papers on the basis of the instructor's criticism and are being afforded this additional opportunity for learning. Such a program adds to the demands on the instructors and makes even more important our development toward smaller classes. This will become possible as our core of experienced teachers is enlarged by the program of co-instructors, using senior candidates.

—KAREN HORNEY, M.D.

Candidates Association

The year 1950-1951 was a busy and successful one for the Candidates Association. The membership is now 80, an increase of 20 new candidates during the past year. Four members were dropped from the roster; two of these were certified and became members of the Association, and two left the Institute.

The candidates initiated a program to support a Building Fund and joined with members of the American Institute for Psychoanalysis and the Association for the Advancement of Psychoanalysis in this common endeavor. The objective is to buy or build a permanent home in which to carry on the activities of each group. These will include a psychoanalytic clinic. A building fund committee has been appointed. The response of the group in interest and financial pledges is most reassuring.

As in the past, senior candidates were

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privileged to participate as assistant instructors in some courses given at the Institute and the New School. There was even greater participation of candidates than in former years in the monthly scientific meetings of the Association at the New York Academy of Medicine, and at the Interval Meetings.

The work accomplished by the committees of the Candidates Association is evidence of the increase in activities and the new responsibilities which have been accepted. The ACAAP liaison committee, consisting of 10 members under the able leadership of Dr. Hugh Mullan, has attempted to integrate itself more definitely with the executive committee of ACAAP. As in the past, candidates lectured in the Henry Hudson series and conducted seminars sponsored by ACAAP. This committee also cooperated with the chairmen of the professional relations, public relations, and lecture committees.

A public relations committee was established by the candidates. Its purpose is to devise and promote the most effective methods of carrying out an educational program for the community concerning the meaning, purpose and significance of psychoanalysis, and emphasizing its practical and everyday application for every person in the community. Doctors Benjamin Becker and Milton Berger are co-chairmen of this committee.

The professional relations committee, under the chairmanship of Dr. Berger, had a busy year. Among the various activities was the review of questionnaires to all the candidates listing their hospital affiliations. A list of hospitals and clinics which have staff openings was also prepared for interested candidates. News releases to various professional papers and magazines were handled by the committee.

A roving forum was initiated, and it recommended that the Board of Trustees consider sending speakers to the various state

hospitals as part of a post-graduate teaching program. The Board has already acted upon this suggestion. The speakers committee—Dr. Becker, chairman—carried out its function to promote a public education program in conjunction with ACAAP. The committee furnished speakers for the ACAAP monthly membership meetings; it procured speakers for lay groups requesting talks on psychoanalysis and related topics. During the year, 26 candidates spoke at ACAAP meetings and 25 spoke before lay groups. A comprehensive public relations program was worked out jointly with the professional relations ACAAP liaison and public relations committee. The course evaluation committee, under the chairmanship of Dr. Ralph Slater, continued to supervise the evaluations made by the candidates of all courses given at the Institute.

In November, 1950, the referral consultant system was inaugurated under the chairmanship of Dr. Lester Shapiro. A referral committee was appointed. Its members make referrals on the basis of a study of the patient's personality makeup and treatment requirements as well as the experience and training of the analyst. The plan functioned smoothly and provides better service both to the community and to members of our group.

All collations after the business meetings were handled by Dr. Joseph Pisetsky as chairman of the house committee.

The monthly bulletin has grown under the editorship of Dr. Louis De Rosis.

Dr. Albert Deutsch, our very efficient treasurer, reports that the group has met its financial obligations and that we have a modest but comfortable balance.

The expanding program of the Candidates Association reflects the interest and sincerity of our group to cope with the many complex problems that growth must meet during this difficult period of time.

—NATHAN FREEMAN, M.D.
President

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